THE SCHOOL DISTRICT OF PALM BEACH COUNTY
SAFE SCHOOLS

Student Truancy Attendance Agreement

Florida Statutes 1003.21 and 1003.24 require regular school attendance of all children between the ages of 6 and 16. The only absences excusable by law are for a student's illness (medical documentation) and as defined in School Board Policy 5.09. This Attendance Agreement must be completed by the school and signed by the student and parent during the Attendance Study Team meeting.

Student Name *(first, m.i., last)* _____ _____ _____

Student ID # _____

Student Grade _____

Parent/Guardian Name _____

Parent/Guardian Telephone ( ) -

School/Dept Name _____

Phone No./PX ( ) -

STUDENT RESPONSIBILITY

I (above named student) agree to arrive at school on time and attend all classes every day. Further, I agree to abide by all the rules and regulations of my school.

In the event of future absences, my parent/guardian will contact the school on the day on which the absence occurs. An excuse from a medical doctor may be required.

Signature of Student (10 years of age or above) *Date*

PARENT/GUARDIAN RESPONSIBILITY

I understand that by law, my child (above named student) is required to attend school. I recognize there has been a problem with his/her regular school attendance. I agree to provide support to my child to remediate this truant behavior. I also agree to monitor my child's daily attendance by contacting my child's school, if needed, to verify my child's attendance.

Signature of Parent / Guardian *Date*

SIGNATURE OF SCHOOL OFFICIAL *DATE* *School Official Title*

PBSD 2224 (Rev. 4/27/2016) ORIGINAL - District Attendance Liaison COPY - Parent/Guardian/Student