

Request for Tuition Credit

***Credit will be given due to illness when your child is absent for 3 consecutive days or more. A credit may also be given if a written 2 week notice was received by the office.**

I request tuition credit for my child _____
My child was absent from school on these days _____

Date: _____ Signature: _____

(This request will either be approved or denied by the office personnel.)

For Office Use Only:

Approved _____ Denied _____

Credit will be given for these days _____

Explanation: _____

Date: _____ Signature: _____