

Bilinguale Schulen Phorms München
 Maria-Theresia-Straße 35
 81675 München

Fax: 089/ 324 93 37-74
 E-Mail: muenchen@phorms.de

REQUEST FOR PERMISSION FOR ABSENCE BY THE HOUR

I hereby ask for permission for absence for the Phorms pupil

..... Class
 Surname, Name

on the from until o'clock
 date

Reason:

An announced test, quiz, presentation or the like

will not take place
 will take place. – Subject: , teacher:

.....
 Place, Date

.....
 Signature of Legal Guardian or Pupil of full age

To be filled in by the school:	
Agree: <input type="checkbox"/> Yes <input type="checkbox"/> No Signature Class Teacher
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Signature Head of School
Begründung:	