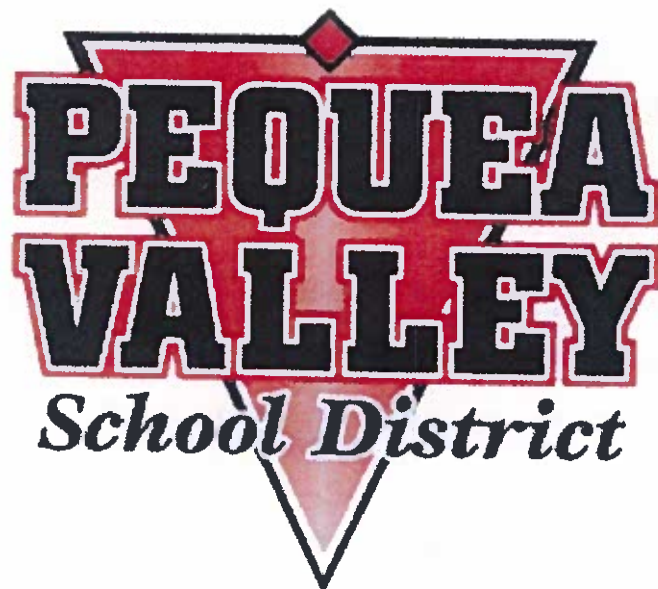


Learner Attendance Handbook



Where Each Learner Counts

September 2017

TABLE OF CONTENTS

📖 Overview.....	pg. 3
📖 Pennsylvania Compulsory Education Law & Definitions.....	pg. 3
📖 School Absences	pg. 3 & 4
📖 Excused Absences	
📖 Unexcused Absences	
📖 Educational Trips	
📖 Medical Appointments	
📖 Tardiness	
📖 Early Excusal	
📖 School District Responsibility for Absences.....	pg. 4
📖 Written Notification for Absences	
📖 Student Attendance Improvement Plan (SAIP)	
📖 Reference Material	
📖 Educational Trip Request Form.....	pg. 5 & 6
📖 Student Attendance Improvement Plan.....	pg. 7-10
📖 Attendance Procedure Flowchart.....	pg. 11
📖 5-Day Letter.....	pg. 12
📖 10-Day Letter.....	pg. 13
📖 Unexcused First Offense Letter.....	pg. 14

OVERVIEW

Pequea Valley School District is committed to work collaboratively with learners and families to promote consistent school attendance for all learners. Regular daily attendance for learners in Kindergarten through grade 12 is a key component of the educational process which includes academic achievement and personal growth.

The purpose of this handbook is to provide an overview of the state laws and regulations pertaining to school attendance as well as the procedure in place within the District to maintain compliance with the state. It is important to know that these procedures are consistent across all schools as well as Pequea Valley Virtual (PVV).

PA COMPULSORY EDUCATION LAW AND DEFINITIONS

PURPOSE OF PENNSYLVANIA TRUANCY LAW –To improve school attendance and deter truancy “through a comprehensive approach to consistently identify and address attendance issues as early as possible with credible intervention techniques.”

COMPULSORY SCHOOL AGE - Except as otherwise provided by law, compulsory school age refers to the period of a child's life from the time the child enters school (which may be no later than at the age of 8 years), until the age of 17 or graduation from a high school, whichever occurs first.

TRUANT - A child subject to compulsory school laws “having three (3) or more school days of unexcused absence during the *current* school year.”

HABITUALLY TRUANT – A child subject to compulsory school laws “having six (6) or more school days of unexcused absences during the *current* school year.” The absences do not need to run consecutively.

SCHOOL ABSENCES

- **EXCUSED (AE)** – Absences that are due the following reasons:
 - Illness, injury
 - Court appointments
 - Medical appointments
 - Death in immediate family
 - Urgent emergencies approved by the administration
 - Extraordinary circumstances involving military service or college entrance requirements (administration approval required **prior** to absence)
 - Educational trips which have received **prior approval** – at least one day in advance.

* **Note/e-mail must be received within 5 days of date of absence.**

** **Please note that excused absences should not exceed 10 days, regardless of the reason, in any school year.**

- **UNEXCUSED (AU)** – Absences that are not due to reasons identified as excused. Examples of unexcused absences:
 - Car trouble

- Child care
 - Missed bus
 - Oversleeping
 - Hair appointment
 - Job interview (unless scheduled by the school)
- **EDUCATIONAL TRIP/ACTIVITY (ET)** – Must have prior administrative approval. A reminder that these days are included with other excused absences. Absences that occur for the following reasons:
 - Religious activities
 - Educational experiences
 - Drivers test
 - College visit (learner must bring a note from the admissions office of the college upon his/her return.)
 - **MEDICAL APPOINTMENTS** – When possible, schedule medical/dental appointments outside of the school day. On the occasion that this is not possible, the learner must bring documentation from the doctor/dentist following the appointment.
 - **TARDINESS** – Arriving at school after the start of the day and before the times deemed ½ day absence.
 - **EARLY EXCUSAL** – Leaving school before the end of the school day.

SCHOOL DISTRICT RESPONSIBILITY FOR ABSENCES

WRITTEN NOTICES FOR EXCUSED ABSENCES

- **5 day written notice** – a letter of concern to parent/guardian is mailed.
- **10 day written notice** – a letter mailed to parent/guardian. At this time, a parent/guardian is required to attend a School Attendance Improvement Plan (SAIP) conference AND any further absences may need to be accompanied by a valid medical excuse in order for your child to have his/her absences recorded as excused.

WRITTEN NOTICES FOR UNEXCUSED ABSENCES

- **3 day written notice** – a certified letter is mailed to parent/guardian. A SAIP conference is scheduled.
- **After 6 unexcused absences**, the district magistrate is notified of the unexcused absences.

STUDENT ATTENDANCE IMPROVEMENT PLAN (SAIP)

Schools must convene an attendance improvement conference to create an individualized plan to address and reduce a learner's truancy. The child's absences and reason(s) for the absences are examined and all interested parties will create a plan to assure regular school attendance.



Request for Educational Trip/Activity

In conformity with the Pennsylvania Code, Title 22, Chapter 11, the Pequea Valley School District provides for exceptions to the normal attendance regulations as follows:

Educational Tours and Trips

The school district recognizes that from time to time students may have the opportunity to participate in preplanned trips and educational experiences during the regular school year. Up to ten (10) days in any one school year may be used for such trips.

Upon approval of a written request from the parent/guardian of the student at least one day prior to the trip, he/she may be excused from school attendance to participate in an educational trip. Preapproval forms shall be available in each building office.

District Guidelines

1. Excusal from attendance will be granted for trips/activities provided the following conditions are met:
 - a. The trip shall provide an exposure that has some educational value for the student.
 - b. The parent/guardian shall present to the school, on the form provided an outline of the trip.
2. It is understood that the parent(s)/guardian(s) or the approved adult(s) will be directly in charge of the educational program of the student(s) and will be responsible for the continued educational progress of the student throughout the trip. All school work missed during the absence is expected to be made up.

Policy revised: 10/10/96
Policy revised: 04/08/99
Policy revised: 01/13/00
Policy revised: 07/31/13
Policy revised: 08/10/17



PEQUEA VALLEY SCHOOL DISTRICT
EXCUSED ABSENCE REQUEST FOR A
PREPLANNED EDUCATIONAL TRIP/ACTIVITY

Directions:

- 1. Return completed form to the building administration at least one (1) day prior to the trip.
- 2. This form must be approved before the learner goes on the trip in order for the trip to be excused.

Name(s) of learner(s) _____ Grade _____
 _____ Grade _____

Date(s) of proposed absence: _____ returning _____

Person(s) directly supervising learner(s) during educational trip/activity:

Name(s) _____

Address _____

Itinerary of the trip/activity: Include experiences which could be educational in nature and will, therefore provide the learner with valuable experiences outside of the classroom.

We have read the school policy and guidelines on the back of this form and are aware of the responsibilities which we have accepted or assigned to someone else. We further agree to abide by the terms set forth in the policy and guidelines.

Date: _____ Parent/Guardian Signature: _____

FOR SCHOOL USE ONLY	
Prior requests: _____	Dates: _____
Determination: _____	Approved _____ Not Approved _____
Date: _____	School Principal or Designee _____

Pequea Valley School District
School Attendance Improvement Plan (SAIP)

Student Information: _____ Date: _____

Student Name:	Home Phone:
Address:	Cell Phone:
City, State, Zip:	Date of Birth:
Special Needs:	Gender:
Medical/Health Concerns:	Grade:

School Information:

School:	Attendance Contact:
Address:	Phone:
City, State, Zip:	
Principal:	
Phone:	

Parent/Guardian Information:

Parent/Guardian 1:	Name:
Address:	
City, State, Zip:	
Phone:	
Email:	
Place of Employment:	
Work Phone:	

Parent/Guardian 2:	Name:
Address:	
City, State, Zip:	
Phone:	
Email:	
Place of Employment:	
Work Phone:	

General Information Regarding Family and Habits/Routines:

Does the student have siblings, step or half-siblings, or are other children or young adults living in the household? _____

With whom does the student live during the week? _____

What time does the student wake up on a school day? _____

What type of transportation does the student use to get to school? _____

Additional Information/comments:

School Records of Absence:

Date of Absence:	Written Excuse Provided? (Y/N)	Reason for Absence:	Action Taken: (e.g. Parent Letter 1 sent out on 4/1/15, John Doe called parent, Mrs. Smith to discuss.

Strengths of the Student/Family/School:

Assessment/Areas of Need:

1.
2.
3.
4.

Solutions: Family/School/Community (please mark all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> A.M. responsibility at school | <input type="checkbox"/> Wake-up call | <input type="checkbox"/> Rewards at home |
| <input type="checkbox"/> Rewards at school | <input type="checkbox"/> Set alarm clock | <input type="checkbox"/> Assign mentor |
| <input type="checkbox"/> Contract attendance goals | <input type="checkbox"/> Go to bed earlier | <input type="checkbox"/> Counseling |
| <input type="checkbox"/> Adjust work schedule | | |
| <input type="checkbox"/> Other: | | |

Planned Solution:

Steps to correct:	Responsible Parties:	Completion Date:

Consequences for non-compliance:

1.

2.

3.

Benefits for compliance:

1.

2.

3.

As the parent(s)/guardian(s), I/we understand that while the school has demonstrated its support and assistance to this student through this process, by law, it is my/our responsibility to ensure that the student attends school.

Signatures:

Parent/Guardian:	
Parent/Guardian:	
Student:	

Date for follow-up meeting:

Next Steps:

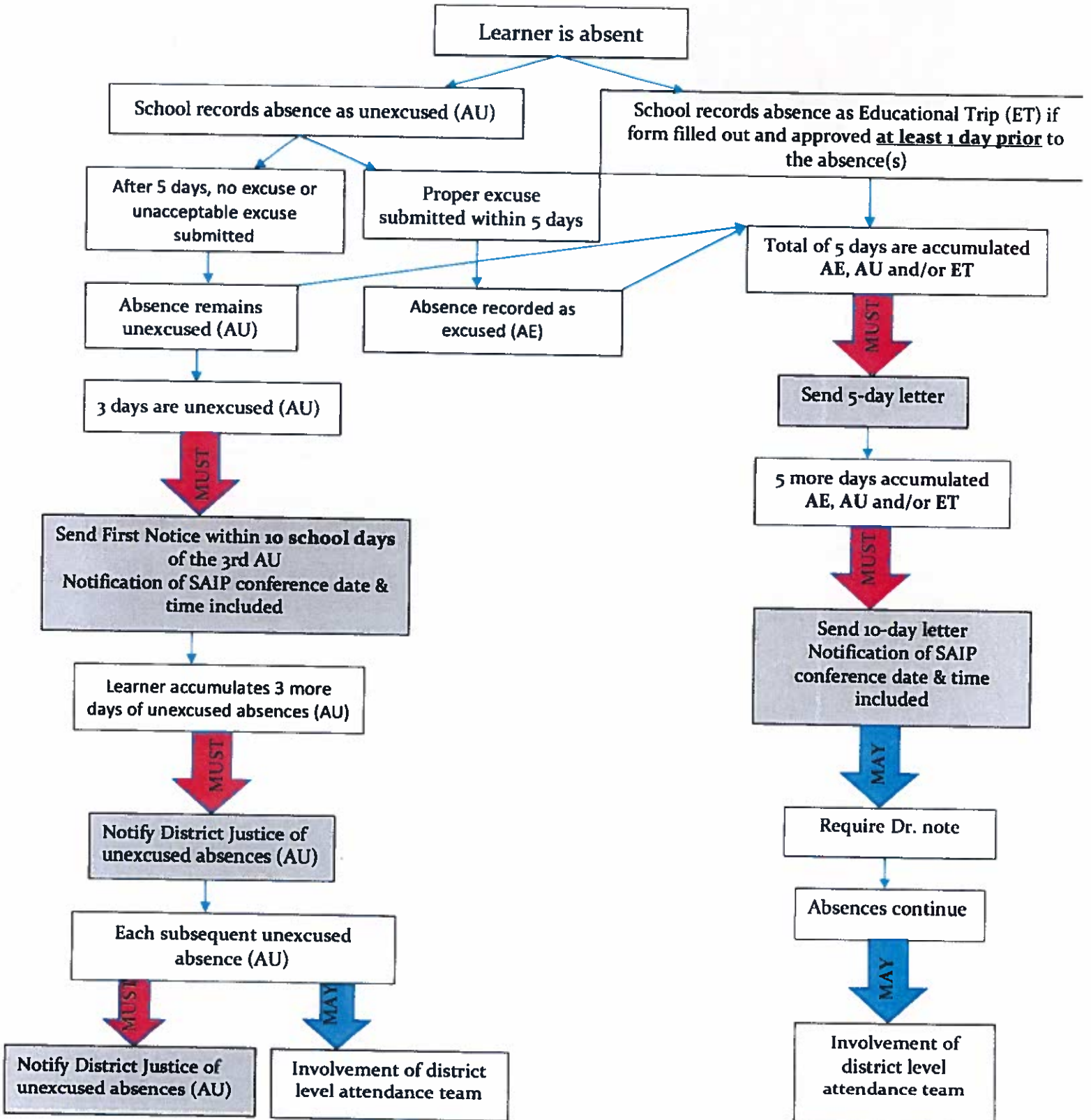
1.
2.
3.
4.

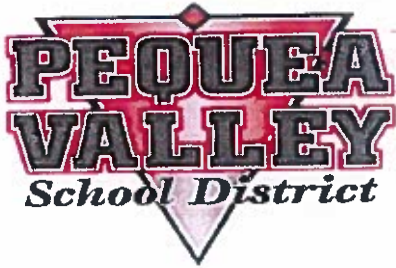
Permission to Release SAIP to other individuals outside of the school district to assist with this plan, I/we give permission to release this SAIP to the following:

Student: _____ Date: _____

Parent/Guardian: _____ Date: _____

Pequea Valley School District Attendance Procedures





P.O. Box 130, Kinzers, PA 17535
PHONE 717/768-5530 FAX 717/768-7176
www.pequeavalley.org

DATE

Dear Parent/Guardian of

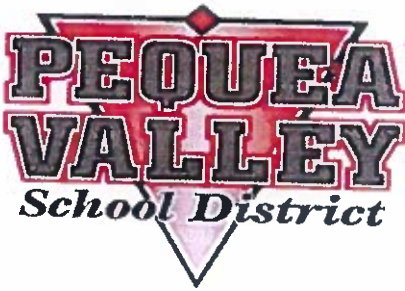
Please note that (your child's name) has been absent a total of 5 days of school. At present, our records indicate that your child was absent on the following dates:

Dates listed here

It is our district's policy to notify parents and guardians in writing whenever a child accumulates five (5) days or more of absence. We share your concern for your child's absence from school and always appreciate when a parent or guardian has communicated with us. Sometimes extended illness or injury makes it impossible for your child to be in school. Regardless of the situation, it is our policy to inform you of your child's absences.

Should you have any questions or special concerns associated with (your child's name) attendance or the district's attendance policy, feel free to contact me at

Respectfully,



P.O. Box 130, Kinzers, PA 17635
PHONE 717/768-5530 FAX 717/768-7174
www.pequeavalley.org

DATE

Dear Parent/Guardian of

A letter from the school notifying you of your child's attendance was mailed previously. Since that letter was sent, your student, (your child's name) has continued to accumulate additional days of absences. At present, our records indicate that your child was absent on the following dates:

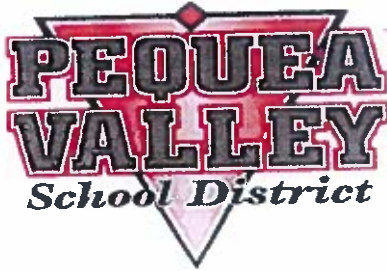
Dates listed here

It is our district's policy to notify parents and guardians in writing whenever a child accumulates ten (10) days or more of absences. The ten (10) days include excused, unexcused, and educational trip absences. We share your concern for your child's absence from school and always appreciate when a parent or guardian has communicated with us. Sometimes extended illness or injury makes it impossible for your child to be in school. Regardless of the situation, it is our policy to inform you of your child's absences. At this time, any further absences may need to be accompanied by an excuse from a physician. Please note that the process of developing a School Attendance Improvement Plan (SAIP) has now begun and your participation in a SAIP conference is requested. At the conference, we will discuss reasons for the absences as well as plan to improve attendance moving forward. The SAIP conference for your child has been scheduled for:

_____ at _____

If you are unable to make this meeting please contact the school office at

Respectfully,



DATE

Regarding:

OFFICIAL FIRST NOTICE OF UNEXCUSED ABSENCES

This letter is to officially notify you that (your child/s name), has accumulated 3 unexcused absences this year on the following dates: . These absences are unexcused and therefore, constitute a violation of the compulsory attendance provision of the Pennsylvania Public School Code (24 P.S. 13-1327). The absences of your child on the dates listed were unexcused for one or more of the following reasons:

_____ We have not received written justification for the absence(s). The allotted time for this absence(s) to be excused has expired.

_____ The reason(s) as presented in your note (is/are) not considered "urgent" as defined by Section 1329 of the School code and (is/are) rejected.

_____ Other:

The school district requires a written/e-mailed excuse for all absences be handed in within five (5) days following the absence. You are further notified that after another three (3) additional unexcused absences by (your child's name) you will be ordered to appear before the District Justice without further notice.

A copy of the relevant provisions of the Public School code is enclosed.

Please note that the process of developing a School Attendance Improvement Plan (SAIP) has now begun and your participation in a SAIP conference is requested. At the conference, we will discuss reasons for the absences as well as plan to improve attendance moving forward. The SAIP conference for your child has been scheduled for:

_____ at _____

If you are unable to make this meeting, please contact the school office at.

Respectfully,