



HAMMARSKJOLD HIGH SCHOOL EXAM CONFLICT AND APPROVED ABSENCE FORM

Student Name:	Home Room Teacher:
Date(s) of Absence:	
Reason for absence/conflict:	

Complete the form and return to Ms. Flaszka by Friday January 11, 2019

ENTER YOUR EXAM IN CONFLICT				EXAM ACCOMMODATION (VICE PRINCIPAL USE ONLY)			
Exam Date	Course Code	Teacher	Period	New Date	Time	Room #	Comments

Signature of Parent (if under 18)

Date

Signature of Vice Principal

Date