



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 the main office

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