



Pulaski County Special School District

# NON-ATTENDANCE DROP FORM

### STUDENT INFORMATION:

Student: \_\_\_\_\_  
(Last Name) (First Name) (Middle Name)

Student ID: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

### SCHOOL INFORMATION:

Name of School: \_\_\_\_\_ School Phone: \_\_\_\_\_ School Fax: \_\_\_\_\_

School Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

### ATTENDANCE INFORMATION:

Date Dropped: \_\_\_\_\_

Reason for being Dropped: \_\_\_\_\_

### ACADEMIC INFORMATION:

Period	Subject/Activity	1st Qtr	2nd Qtr	1st Sem	3rd Qtr	4th Qtr	2nd Sem	Books Due	Teacher Signature
1									
2									
3									
4									
5									
6									
7									
8									

Current Services Received:  Talented & Gifted Class(es)  Special Education Services  504 Accommodations

Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Attendance Clerk: \_\_\_\_\_ Date: \_\_\_\_\_