



# JOHN PAUL STEVENS HIGH SCHOOL

600 N. Ellison Drive • San Antonio, Tx 78251 • 210-397-6450 • www.nisd.net/stevens  
Temporary address: 6632 Bandera Road, San Antonio, Texas 78238

Harold Maldonado, *Principal*

Dr. John M. Folks, *Superintendent*

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

I.D. # \_\_\_\_\_

Grade: \_\_\_\_\_

Attendance Waiver Committee:

I, \_\_\_\_\_, am applying to have **excused** absences waived. I am requesting that the Attendance Waiver Committee consider waiving my absences due to extenuating circumstances.

Please check the type of extenuating circumstance:

Medical/hospital     Unforeseen emergency     Other

Explanation of the incident or situation:

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I am requesting that \_\_\_\_\_ days be waived due to the documentation (i.e. medical notes) attached to this letter. Documentation is essential in being considered for a waiver. **If there is not substantial documentation provided, a waiver will not be granted.** \_\_\_\_\_ (student's initial)

**Not all applications for a waiver are approved; therefore, a student applying for a waiver should also plan on attending Saturday School.** \_\_\_\_\_ (student's initial)

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Parent/Guardian Signature**

-----**Office Use Only**-----

Date received: \_\_\_\_\_

Waiver Meeting: \_\_\_\_\_

**ACCEPT**

**DENY**