

BUCKEYE VALLEY LOCAL SCHOOLS

Teacher Absence
(Article XIII - BVTA)

NAME _____

Class Assignment _____

School Assigned _____

Date of Absence _____

Length of Time Absent (in minutes) _____

Class Absent from _____

Reason for Absence _____

Signature of Teacher _____

APPROVED BY: _____

Principal

BUCKEYE VALLEY LOCAL SCHOOLS

Teacher Substitution
(Article XIII - BVTA)

NAME _____

Regular Teacher _____

Class covered _____

Date of Substitution _____

Length of Time (in minutes) _____

Signature of Substitute _____

APPROVED BY: _____

Principal