Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class Period\_\_\_\_\_\_\_

 

**LATE WORK SLIP**

Directions: In order to submit ANY late work or make-up work you MUST **fill out** this page, **get it signed** by your parent/guardian, and **staple it** to the top of your work. Select the first column that your work fits under by putting a CHECK MARK in the blank provided and **fill in the column COMPLETELY**. Due dates may be obtained by listening in class and/or visiting the “Work and Learning” tab of the class website: [www.mchone1617.weebly.com](http://www.mchone1617.weebly.com)

Work submitted without following these procedures will not be graded. This is documentation.

**ASSIGNMENT TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (Submit only 1 slip per assignment; more than one assignment will each need its own slip.)

***Which applies to you? Work from left to right and fill in the first one that fits your situation.***

|  |  |  |
| --- | --- | --- |
|  **Extended Time****Check one:** **IEP 504 Plan ELL**Due Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(+ Time and ½ =)Extended Time Date: \_\_\_\_\_\_\_\_\_\_Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_(\*If you have “shortened assignments” and are, for any reason, not aware of what you are to do – SEE ME immediately!) |  **Make-up Work** (if absent)Date Absent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Due Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(+ number of days absent)Last Date Accepted: \_\_\_\_\_\_\_\_\_\_(+ number of days absent)Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Absent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Reason Absent:  Sick Doctor’s appointment Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  **Late Work** (if others are N/A)Due Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Date Accepted: \_\_\_\_\_\_\_\_\_\_Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| I have reviewed the above and acknowledge that my child is using their documented extended time.Parent/Guardian Name (PRINT):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent/Legal Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | I have reviewed the above information and verify that this was an excused absence.Parent/Guardian Name (PRINT):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent/Legal Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | I have reviewed the above information and spoken to my child about the importance of turning work in on time.Parent/Guardian Name (PRINT):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent/Legal Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |