

**APPRENTICE ABSENCE FORM**  
 To be attached to proof item. Rev2. 10-04

Approved - Excused Absence	Denied - Unexcused Absence
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FOR HEAD INSTRUCTOR USE ONLY

**Plumbers Local Union No.1**  
**New York City Training Center**  
**37-11 47<sup>th</sup> Avenue**  
**Long Island City, New York 11101**  
**FAX No. (718) 752-9634**

**SENDING VIA FAX? SEND FRONT AND BACK!**

FOR OFFICE USE ONLY

*NAME (PLEASE PRINT)*

RECEIVED STAMP

*ADDRESS*

*CITY* *STATE* *ZIP*

BY FAX

BY MAIL

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*SOCIAL SECURITY NUMBER* *PHONE NO.*

BY HAND - NAME

*Current/Last Employer* *Current/Last date of employment*

The undersigned apprentice hereby requests an **excused absence** for the following school day, \_\_\_\_\_  
Day of the Week Date M/D/Y Class #  
 with the following proof: (please circle one from back of this form) a b c d e f g h i

The facts herein stated are true and correct in every respect :

\_\_\_\_\_  
 (SIGNATURE OF APPRENTICE) (DATE)

**THIS FORM AND THE ASSOCIATED PROOF MUST BE SUBMITTED WITHIN TWO WEEKS OF THE ABSENCE**

**CLEARLY AND BRIEFLY EXPLAIN THE REASON FOR YOUR ABSENCE**

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**Please check the box for the type of proof being submitted as listed below, and circle the same letter on the front of this application.**

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- (a) PERSONAL ILLNESS / PERSONAL MEDICAL EMERGENCY-**  
(EXCUSABLE) *HOSPITAL ADMISSION FORMS, EMERGENCY ROOM FORMS, LETTER FROM DOCTOR, ETC.*
- (b) FAMILY MEDICAL EMERGENCY (DEPENDENT CHILD or SPOUSE) -**  
(EXCUSABLE) *HOSPITAL ADMISSION FORMS, EMERGENCY ROOM FORMS, LETTER FROM DOCTOR, ETC. and PROOF OF RELATIONSHIP*
- (c) HOME EMERGENCY (DISASTER, FIRE or FLOOD) -**  
(EXCUSABLE) *HOME FIRE OR DISASTER DAMAGE REPORT FROM F.D. or P.D. or INSURANCE COMPANY, ETC.*
- (d) REQUIRED LEGAL APPEARANCE-**  
(EXCUSABLE) *SUBPOENA, JURY DUTY NOTICE, DESK APPEARANCE NOTICE, ETC. (NOTE: TRAFFIC VIOLATIONS NOT ACCEPTABLE)*
- (e) ARREST or INCARCERATION -**  
(EXCUSABLE) *ARREST PROPERTY RECEIPT, DESK APPEARANCE NOTICE, ETC. (NOTE: TRAFFIC VIOLATIONS NOT ACCEPTABLE)*
- (f) AUTO ACCIDENT ON THE WAY TO SCHOOL-**  
(EXCUSABLE) *ACCIDENT REPORT FROM P.D. or DMV, INSURANCE COMPANY, ETC. (NOTE: TRAFFIC VIOLATIONS NOT ACCEPTABLE)*
- (g) CRIME VICTIM ON THE WAY TO SCHOOL-**  
(EXCUSABLE) *CRIME or THEFT REPORT FROM P.D., ETC.*
- (h) DEATH OF IMMEDIATE FAMILY MEMBER- (Immediate Family Only)**  
(EXCUSABLE) *DEATH CERTIFICATE, ETC. and PROOF OF RELATIONSHIP*
- (i) RELIGIOUS OBSERVANCE PROHIBITS ATTENDING SCHOOL-**  
(EXCUSABLE) *RELIGIOUS CALENDAR, ETC. and PROOF OF AFFILIATION*

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**You must ATTACH a clear copy of the item of proof you are submitting with this application.**

- YOU MUST CALL TO NOTIFY **THE OFFICE OF THE TRAINING CENTER** ANY DAY YOU CANNOT REPORT TO **WORK OR SCHOOL** DUE TO ILLNESS OR ANY OTHER REASON.
- IF AN ABSENCE IS REPORTED, THE STUDENT WILL **NOT BE PAID** FOR THAT DAY. THE STUDENT MUST ALSO MAKE UP THE ABSENCE **WITHOUT PAY**. FAILURE TO APPEAR AT A **SCHEDULED** MAKE UP CLASS WILL BE CONSIDERED **ANOTHER ABSENCE, AND REQUIRE AN ADDITIONAL MAKE UP DAY.**
- IF AN ABSENCE FROM WORK OCCURS ON **THE WORKDAY PRIOR TO A SCHOOL DAY, OR THE WORKDAY FOLLOWING A SCHOOL DAY**, THE EMPLOYER IS **NOT REQUIRED TO PAY FOR THE ASSOCIATED SCHOOL DAY.**
- **EXCUSED ABSENCE** – ABSENCES LISTED AS ALLOWABLE, WITH TIMELY PRESENTATION OF ACCEPTABLE PROOF.
- **EXCUSED ABSENCES** STILL MUST BE MADE UP BY THE END OF THE SEMESTER. THE MAXIMUM NUMBER OF **UNEXCUSED** ABSENCES ANY STUDENT WILL BE PERMITTED, IN ANY SEMESTER, WILL BE LIMITED TO ONE (1). STUDENTS WHO EXCEED ONE (1) **UNEXCUSED** ABSENCE WILL BE **RETAINED IN GRADE AND SUSPENDED.**

**BY THE AUTHORITY OF THE JOINT APPRENTICESHIP AND TRAINING COMMITTEE**

VINCENT ASPROMONTE  
Contractors Assoc. / JATC Co-Chairman

ARTHUR O. KLOCK JR.  
Director of Trade Education

JOHN J. MURPHY  
Local 1 Bus. Mgr. / JATC Co-Chairman