Student Name: ________________________________________________

Team: ______________________________________________________

1. So far this year, there have been ___________ student days of school.
2. I have been present for ___________ school days.
3. I have been absent for ___________ school days.
4. I have been in school ___________% of the time.

**MY ATTENDANCE RATE GOAL IS:** _________________%

The biggest challenge(s) I have to coming to school everyday is:

Some things I enjoy about being at school are:

The people I feel comfortable with at school who do/would support me with improving my attendance: (peers and adults) are:

The way they do/would support me is:

To improve my attendance, I will try to do the following:
1.
2.
3.
4.

**PARENT/ GUARDIAN STRATEGIES AND GOALS (please check all items you will try to help your child meet their attendance goal)**

- I will keep track of my attendance on a calendar at home/school. I will review weekly with the an adult at school __________________
- I will make sure I have a regular bedtime and a strategy for getting up on time. I will plan to be in bed on school nights by : _______ PM. I will make sure and computer/ TV/ gaming devices are off by
I will make sure an alarm is set for ______ AM.

- If I have a stomach ache (no vomiting or diarrhea), a headache or a cold, and fever under 100, I will come to school and check in with the nurse as needed. I will take any medications for symptoms at home before I get on the bus.
- I will have a plan with a relative, friend or neighbor who can give me a ride to school if I miss the bus.
- If I miss a day, I will email my teachers to make a plan for completing missed work.

Other Strategies:

SCHOOL-BASED SUPPORTS:

Student signature: _______________________________________________________

Parent signature: _______________________________________________________

Guidance signature: ___________________________________________________

Administrator signature: _______________________________________________