

**REL VERIFICATION**

**CAMPUS NAME** \_\_\_\_\_

**CAMPUS ID** \_\_\_\_\_

**STUDENT NAME** \_\_\_\_\_

**DATE(S) OF REL** \_\_\_\_\_

**Attach parent note, if you receive one, and/or have parent complete information below.**

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**This is to verify that my child (named above) missed school \_\_\_\_\_ for the purpose of (Dates)**

**observing the below named religious holy day, which I understand is defined as a day that all members of an established religious community are obligated to serve as a tenant of the faith.**

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**(Holy Day)**

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**Parent/Guardian Signature**

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**Date**