

**IRAAN-SHEFFIELD INDEPENDENT SCHOOL DISTRICT
Attendance Correction Request**

School Year _____

Student Name/Loc.ID	
Date of Attendance Mistake	
Reason for Attendance Correction	
Date Person Requesting Change	
Signature Of Person Requesting Change	
CHECK ONE <input type="checkbox"/> Change from Absent to Present <input type="checkbox"/> Tardy to Present <input type="checkbox"/> Was in ISS <input type="checkbox"/> Change to WD	CHECK ONE <input type="checkbox"/> Change from Present to Absent <input type="checkbox"/> Was in AEP <input type="checkbox"/> Absent from AEP <input type="checkbox"/> Tardy to Absent
PEIMS DATE OF CORRECTION	
PEIMS Signature Of Person Making Correction	

Form will be filed with Attendance clerk
1 copy will be filed at campus level