

Dear Parent or Guardian,

Fairfax County Public Schools is committed to fostering a caring culture where each student can thrive in an educational environment where they feel welcome. Your student has indicated the need to be excused from a portion of at least one class to pray. FCPS supports students who need to take time during the school day to practice as their faith requires. We want you to be aware that your student requested to regularly miss instructional time. By doing so, your student agrees to be responsible for all work that needs to be completed or made up.

The approximate time requested is from 1:55 to 2:15 daily, which would cause your student to miss a portion of 8th/9th periods. The prayer area is located in the library. If you agree to the request, your student will be provided with a pass to show the teacher.

If you have any concerns or need to discuss your student's stated requirement, please email me at hdbousmansta@fcps.edu, so we can make sure we are providing the appropriate request.

Student	Name	
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ID number_____

I understand that I must be quiet and respectful during the designated prayer time. I will adhere to the rules and report to class in a timely manner. Failure to do so may result in disciplinary action or loss of privileges.

Student signature	Date
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Parent Name _____

Parent signature _____

Please return this completed form to Ms. Jama in the main office to receive your pass.