

**REL VERIFICATION**

**CAMPUS NAME**  Oak Ridge High School

**CAMPUS ID**  170-902-005

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

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

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

---

**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.**

---

**(Holy Day)**

---

**Parent/Guardian Signature**

---

**Date**