

# Harrison High School

## *Absence Excuse Form*

Date \_\_\_\_\_

Date(s) of absence(s) \_\_\_\_\_

Student's Name (Please Print) \_\_\_\_\_

Reason for Student's Absence(s):

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Signature of Parent/Guardian

***NOTE: Please submit to Mrs. Moeller in the Attendance Office in Room B104 in a timely manner.***