

BISHOP MCGUINNESS CATHOLIC HIGH SCHOOL ONE-DAY EXCUSED ABSENCE FORM

_____ will be absent from school on _____
Name Grade Date

The student is, of course, responsible for all work missed during the time he/she is absent. Please sign this form so that parents may know of any reservations you may have concerning this student's absence from school.

Reason for the absence: _____

Teacher Signature

Objections/Comments

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

Students must have all teachers' signatures before taking this form home for their parent's signature. Upon completion of this form, please bring it to the Main Office for proper attendance recording before the trip is made.

Parent's Signature Date

Administrator's Signature Date