

**NOTE FOR ABSENCE**

Child's Name \_\_\_\_\_ Date \_\_\_\_\_

Teacher's Name \_\_\_\_\_

My child was absent from school on \_\_\_\_\_ due to:

- \_\_\_\_\_ illness
- \_\_\_\_\_ attendance at funeral
- \_\_\_\_\_ doctor/dentist appointment
- \_\_\_\_\_ serving as a Page in the General Assembly

Description: \_\_\_\_\_

\_\_\_\_\_

Parent's Signature \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Parent's Signature \_\_\_\_\_