

**NOTE FOR ABSENCE**

Date \_\_\_\_\_

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

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

\_\_\_\_\_