



Take Your Student to Work Day

April 25, 2024

Student Name _____ Grade _____

To the Employer of the Parent/Guardian:

Thank you SO MUCH for participating in this national event. We hope our student was a positive addition to your workplace today. Please provide the requested information and sign this form so the student's absence may be documented as excused.

Parent/Guardian, please return this completed form to the Attendance Office at your student's school. The form must be returned in order for the absence to be excused.

Sincerely,

Marquez Jackson
Director of Student Services
Flagler Schools
386-437-7526, x1106

My signature below serves as verification that the student listed above was at my employee's work place on April 25, 2024.

Name of Workplace _____

Supervisor of Parent/Guardian (signature) _____

Phone Number of Supervisor _____

My student was at my place of employment on April 25, 2024.

Parent/Guardian Signature _____ Phone _____

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