ABSENCE NOTIFICATION

My child __________________________________ in Grade ____________________
Please Print Name

was absent from school on ………………………………………………………

Please indicate below the reason for your child’s absence.

201 ☐ Illness
205 ☐ Medical Appointment
800 ☐ Parent Choice
209 ☐ Dental Appointment
804 ☐ Holiday
202 ☐ Accident/Injury
208 ☐ Refusal
☐ Other (please indicate) ____________________________________________

Parent’s/Guardian’s Signature ___________________________________________

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