

Absence Form

Elementary School

(Teachers may or may not give assignments prior to absence)

Please excuse my student, _____, in

Grade _____ / _____ from school
(Teacher Name)

on the following dates (and time if applies)

_____ for the following reason:

- Vacation Doctor/ Dentist Appointment
- Other _____

Parents: Please sign this form and give it to your student's teacher.

Teachers: Please sign to acknowledge that your student will be absent for the above dates, **put this date in your attendance and return this form to the office to be kept on file.**

Students: If your teacher has assigned you homework, please make sure it is completed and returned to your teacher upon arrival back from absence.

Parent Signature: _____ Date: _____

Teachers Signature: _____ Date: _____

Principal Signature: _____ Date: _____