



## Student Absent Form

Name:

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Grade:

Date/s of  
Absence:

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My Child was absent on the above date/s due to the following:

\_\_\_ Illness or Injury

\_\_\_ Medical or dental appointments (needs the notes from the doctors)

\_\_\_ Court or Administrative Proceedings (needs the documents)

\_\_\_ Educational Opportunity (approved by school administration)

\_\_\_ Death in Family

\_\_\_ Quarantine

\_\_\_ Religious Observance

\_\_\_ Medically Fragile (needs documentation form doctors)

Parent Signature:

Date:

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(Please give this to front desk officer or school registrar)