Absence Note for: _________________________
(Surname – Printed)
YEAR [     ]         _________________________
(Given Name – Printed)
This note is for an absence that: [     ] has occurred
[     ] will occur
It covers ____ school day/s from ___/___/___ to ___/___/___
Reason: ___________________________________________ __________
SIGNATURE: ______________________     DATE: ___/___/___

PARENT COPY
Date Note Sent – ___/___/___
Covering _____ days
From ___/___/___ To ___/___/___
Reason: ______________________
__________________________________
SIGNATURE: ______________________     DATE: ___/___/___