



School Absence Excuse Form

Student's Name: ___ _____

Was absent on _____

An explanation from the parent/guardian for each case of absence is required within 3 days of the students return to school.

Please state the reason for the above noted absence below.

If absence was due to a medical reason and the student was seen by a Dr., please also include a doctor's note.

Signature

Date

Notes can be sent in with your child, dropped off at school, or faxed to (610)351-0307.