

EXCUSED ABSENCE FORM

STUDENT'S NAME: _____

STUDENT'S ID: _____

DATE(S) & PERIOD(S) OF ABSENCE: _____

REASON FOR ABSENCE (please check appropriate box):

- Illness/Health Related**
- Religious Observance**
- Family Emergency**
- Court**
- Funeral**
- Other** _____

PHONE # WHERE NOTE CAN BE VERIFIED: _____

PARENT/GUARDIAN NAME: (PRINT) _____

PARENT/GUARDIAN SIGNATURE: _____

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