Excuse Note for Absence*

Student Name:_____
Grade: _____
School: _____
HR Teacher: _____
Date(s) of Absence: _____
Reason for Absence:

Illness Injury Family Emergency

Death in Family

Healthcare Appointment –

Provider Name: _____

Other: _____

Parent/Guardian Signature: _____
Date: _____

*Excuse notes must be submitted within 5 days of the absence. Absences for educational travel or college visits require completion of a separate form. Please contact your child's school's attendance office to complete the required form.

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