



**ABSENCE NOTE
ST. MARY'S
PRIMARY SCHOOL**

Child's name _____

- | | | | |
|---------------------------------|-----------------------------|---------------------------------|-----------------------------|
| <input type="checkbox"/> 6M | <input type="checkbox"/> 6H | <input type="checkbox"/> 5E | <input type="checkbox"/> 5H |
| <input type="checkbox"/> 4N | <input type="checkbox"/> 4C | <input type="checkbox"/> 3H | <input type="checkbox"/> 3D |
| <input type="checkbox"/> 2R | <input type="checkbox"/> 2C | <input type="checkbox"/> 1M | <input type="checkbox"/> 1P |
| <input type="checkbox"/> Prep E | | <input type="checkbox"/> Prep G | |

Date (s) of Absence:

----/----/2008 to ----/----/2008

Reason for Absence:

() illness (please define)

() appointment () other
(please define)

Parent name: _____

Signed: _____

Date: _____



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