

Absentee / Late / Early Dismissal Form

Student name:
Date(s):
My student was late/absent for:
(please check one)
☐ Illness (please explain)
☐ Dr. / Dentist appointment (please submit a Dr's note)
Other (please explain)
Will be leaving school early on (date)
Time: Reason:
*Please complete form 1 day in advance for early dismissals.
Absences for illnesses / injuries, and family emergencies or special
occasions such as wedding, graduations, funerals are marked as excused
absences. All others will be marked as unexcused. If an absence form is not submitted to the office upon student's return to school, the absence
will be recorded as unexcused.
*Please complete this form 3 days in advance for planned absences.
Parent signature: