St. Mary's School
Absence Note

Dear Teacher,

My child_____Grade_____

was absent on _____because he/she was:
(date(s)

_____ sick
_____ at a medical appointment (doctor, dentist, etc.)
_____on vacation
_____ other…(please explain)
_____
_____
_____
_____ _____

PARENT SIGNATURE: _____ DATE: _____

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