



Absence Note Form

Student's Name _____

Date(s) of Absence _____

Reason for absence:

____ Illness or injury

____ Doctor Appointment

____ Death in the family

____ Absence with prior approval (request was presented before absence)

____ Driver's Test (1/2 day excused absence)

____ Ministry Obligations

____ College Campus Visit

____ Other

Please specify:

Parents please note when a student in grades 9-12 reaches five (5) absences in a marking period, they will receive no credit for the marking period for that course or courses. An excused absence will still result in a student who is not physically present in school to be marked absent, however if an absence is deemed excused the student will be permitted to make-up any missed assignments, quizzes, and/or tests.

Parent/Guardian Signature _____

Daytime Telephone Number _____