Student Excuse Form

Student's Name: _____ Date of Absence(s): From _____ Through _____

Grade _____ Homeroom Teacher _____

Please excuse my child's absence(s) for the following reason:

- ☐ Medical or dental appointment
- ☐ Approved pre-arranged special circumstances or other extenuating circumstances
- ☐ Valid educational opportunity approved in advance by the school board
- ☐ School sponsored activity with prior approval by principal
- ☐ Isolation ordered by the county health officer of State Board of Health
- ☐ Illness or injury of the student
- ☐ Death or serious illness in the family
- ☐ Subpoena by a court
- ☐ Event required by student's or parent's religion

Parent's Signature _____ Date: _____ Daytime phone: _____

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