

CYPRESS ELEMENTARY SCHOOL STUDENT ABSENCE NOTE



Please print neatly.

Student Last Name: _____

Student First Name: _____

Student ID Number: _____ Grade: _____

Homeroom Teacher: _____

Parent/Legal Guardian Name: _____

Parent Contact # (during school day): _____

Parent Email: _____

Date(s) of Absence: _____

Reason for absence:

(Please note, the following reasons are NOT excused: going out of town, vacation, missed the bus, overslept/tired, car trouble [more than once for one day], unspecified family emergency)

Absences of four (4) or more consecutive days for illness require a doctor's note to be excused. Absence notes must be received within three (3) school days of student's return to school in order for absence to be excused.

Parent/Guardian Signature

Date

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