

**CONSIDERED ABSENCE**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Teacher: \_\_\_\_\_

I am requesting that my child(ren) be excused from school for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

Date of absence: \_\_\_\_\_

Signed: \_\_\_\_\_

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Principal's approval:

\_\_\_\_\_ Excused      \_\_\_\_\_ Unexcused Reason: \_\_\_\_\_

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