ABSENTEE NOTE

Date:				
To Whom It N	/lay Concern:			
Please excuse	my child,	(Grade)	for being absent on	
(Please indicate	date/s.)			
_	illness medical appoints dental appointm vacation other:	ent		
(Parent's Name)		(Parent's Signature)		
Date:		EE NOTE		
	my child,	(Grade)	for being absent on	
	date/s.)			
because of:		ment ent		
(Parent's Name)		(Parent	(Parent's Signature)	