

St. Agnes School

Absence/Late Excuse

To: _____
(Teacher's name)

Date: _____

_____ was absent from school on: _____
(Student's name) (Date(s))

For the following reason:

- ⌚ Illness (please be specific; sore throat, fever, strep throat, etc...)

- ⌚ Vacation
- ⌚ Family Emergency
- ⌚ Doctor or Dental Appointment

Signature of Parent/Guardian: _____

Friendly Reminders

- ⌚ Please call the office (225-8500) to report your child absent as early as possible. You may leave a message on the answering machine.
- ⌚ If your child has strep throat, please keep them home until they have completed one full day of medication.
- ⌚ We ask that you keep your child home until they are fever free for 24 hours for the safety of all of our students.
- ⌚ All medication, prescription and over the counter, must be brought into school by a parent or guardian with a doctor's order and parent's permission.

Thank you for your help.