



CHS ALL DAY ABSENTEE FORM

Use this form when your child has been absent all day from school. You must bring this form to the Front Office within 48 hours of return to school for the absence to be excused.

_____, _____, _____
(print student name AND student number) (grade) (student birthday)

was absent on _____
[enter specific date(s)]

Excused:

Illness (self, immediate family)

Court appearance

Doctor/Dentist appointment

Religious holiday

Academic event

Death of family member

(parent/guardian name – please print)

(parent/guardian signature)

(phone number for parent)

(today's date)

Important: After fifteen (15) days of absence, whether excused or unexcused, a student will be required to turn in a doctor's note for every subsequent absence, tardy and early dismissal to be considered excused.