STUDENT ABSENCE

My child ___________________ in Grade ____
was absent from school on the following date(s):
Beginning Date: ____________
End Date: ____________
This absence was for the following reason
(please tick appropriate box).
☐ Illness
☐ Medical Appointment
☐ Holiday
☐ Parent Choice (Please specify)_____________________________

Signed: ________________ Date: __________
Please provide this to your child’s teacher upon
return to school.

Hurstbridge Primary School No. 3939
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