

This section to be retained by parent/caregiver

Child's Name _____
Date note sent ____/____/____
Covering _____ days
From: ____/____/____
To: ____/____/____
Reason given:

Cambewarra Public School - Reason for Absence - Phone 4446 0038
(this section to be completed and forwarded to the class teacher—please print all information)

Surname _____ First Name _____ Class _____
This note is for an absence from school for my son/daughter. It covers _____ school days.
From: ____/____/____ to: ____/____/____
Reason for absence: _____
Signature of parent/caregiver: _____ Date: ____/____/____
Date received by class teacher/school ____/____/____

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