

DATE: _____

TO: St. Paul School Classroom Teacher, School Secretary

FROM: _____

Please print and sign your name

Please excuse my child/ward from school on _____ (dates absent).
S/he will be visiting/vacationing during this time. S/he is in the _____ grade.

We understand that we are responsible for completing assignments given during this time period and will make arrangements with our child's teacher to take work with us and return in it a timely manner for evaluation.



DATE: _____

TO: St. Paul School Classroom Teacher, School Secretary

FROM: _____

Please print and sign your name

Please excuse my child's absence on _____. S/he was

1. not feeling well
2. suffering from the flu
3. on an antibiotic for conjunctivitis (pink eye) or strep throat
4. visiting doctor
5. visiting dentist
6. visiting another school (8th grade only)

We understand that we are responsible for completing assignments given during this time period and will make arrangements to complete and return the work in a timely manner.