

**St. Elizabeth Parish School  
Absence Form**

Please return this form with your child following an absence from school.

NAME OF STUDENT \_\_\_\_\_

GRADE \_\_\_\_\_ DATE(S) ABSENT \_\_\_\_\_

REASON FOR ABSENCE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_

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