

Lewis C. Cassidy Academics Plus School  
Absence Excuse Note

Today's Date \_\_\_\_\_ Child's Name: \_\_\_\_\_

Child's Grade: \_\_\_\_\_ Child's Room: \_\_\_\_\_ Number of Days Absent: \_\_\_\_\_

List Date(s) Absent: \_\_\_\_\_

**Absences of 3 or more consecutive days require a doctor's note.**

Reason for Absence: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

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