



Our Lady of the Angels School

EXCUSE NOTE

NAME OF STUDENT _____ GRADE _____

ABSENCE Date(s): _____ TARDY Date(s): _____

EARLY DISMISSAL Date(s): _____ Early Dismissal Time: _____ **

**Student will be picked up by _____

Dates of PLANNED ABSENCE: _____

Pennsylvania State Law requires an explanation from the parent for each absence or late arrival. Please state the reason for your child's absence below:

Reason for absence (Please be as specific as possible):

Parent/Guardian Name (printed): _____

Parent/Guardian Signature (ink): _____ Date: _____

- **Students have two (2) days following an absence to return this form.**
- **If the excuse form is not returned on the second day, the student will call their parent.**
- **If the excuse form is not returned by the third day, the student will lose their recess until the excuse has been given to the teacher.**

For Office Use Only:

Absence Date(s): _____ Tardy Date(s): _____ Early Dismissal Date(s): _____

NOTES: _____

Signature of Principal _____