



# ABSENCE FORM

SAK-AF-2025-01



Parents/Guardians are required to provide this form as a written explanation for their child's absence from school. In cases where the absence is due to a contagious illness or Head lice infestation, a medical certificate is mandatory upon the child's return to school, certifying their fitness to resume attendance. If the absence is for a hospital or therapy appointment, please attach the appointment letter or certificate of attendance.

Child's Full Name \_\_\_\_\_

Class \_\_\_\_\_ Teacher \_\_\_\_\_

Date of Absence - From

<input type="text"/>	<input type="text"/>	<input type="text"/>
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D M Y

To:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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D M Y

My child has been absent from school due to: Tick ✓ as appropriate:

➤ Sick	<input type="checkbox"/>
➤ Medical/Dental Appointment	<input type="checkbox"/>
➤ Vacation	<input type="checkbox"/>
➤ Head Lice (present certificate from Yama Yabi)	<input type="checkbox"/>
➤ Family Bereavement	<input type="checkbox"/>
➤ CDAU Appointment	<input type="checkbox"/>
➤ Speech/OT/Physio Therapy	<input type="checkbox"/>
Other Reason (Please specify)	

Parent/Guardian Signature