

**Record of Absences**

*(To be kept for your records)*

Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Thomas Acres Public School

**ABSENCE NOTE**



Name: \_\_\_\_\_ Class \_\_\_\_\_

was absent from school on \_\_\_\_\_

because \_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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