



St. Mary's School Donnybrook

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Absentee Notice

Student Name: _____ Class: _____

Dear _____

I wish to advise you that my child was absent on (date) _____

The reason for this absence was _____

A Medical Certificate is enclosed Yes/No Signed _____

Date _____

Absentee Notice

Student Name: _____ Class: _____

Dear _____

I wish to advise you that my child was absent on (date) _____

The reason for this absence was _____

A Medical Certificate is enclosed Yes/No Signed _____

Date _____