Lake-Lehman School District

ELEMENTARY ABSENCE SLIP

	GRADE/SECTION
NAME(FIRST AND LAST NAME)	GRADE/SECTION
Has been absent for the following reason:	
Date of absence (s)	TH, DAY, YEAR)
(MON)	ΓH, DAY, YEAR)
Parei	nt Signature
◆ OFFICE PERSONNEL ONLY	
EXCUSED	
UNEXCUSED	
	Y ABSENCE SLIP
TODAY'S DATE	
NAME(FIRST AND LAST NAME)	GRADE/SECTION
NAME(FIRST AND LAST NAME)	
NAME	GRADE/SECTION