



Isle of Hope Elementary School

Dear Parent/Guardian:

Your child has just returned to school after being absent. Please complete the bottom portion of this form, sign and return it to school within two days so we can file it as an absence note. If further information is needed, we will notify you of what documentation we need.

Thank you,

Teacher Name

My child, _____, was absent on
Child's name

_____. My child was absent due to the
Date of Absence
following reason:

- Illness (please bring doctor's excuse if applicable)**
- Family emergency:** _____
- Death in Family (please bring copy of obituary)**
- Other:** _____

Parent/Legal Guardian signature

Date

***Please note that as stated in the Savannah Chatham Truancy policy not all absences are eligible to be counted as an excused absence.**