

CLEVELAND HS Student Absence Excuse

Name of Student: _____ D.O.B: _____
Last First Middle

My child was absent from _____ to _____

Parent/Guardian Contact #: _____

REASON FOR ABSENCE: (Please check one)

- Illness/Injury or Medical/Dental App.
- Personal (Non-illness)
- Other: _____
Reason

Parent/Guardian Name Signature Date