



Sullivan West Central School

Absentee Excuse Form

Please Excuse:

Student's Name: _____

Homeroom: _____

Date/Dates of Absence(s): _____

Medical *(please attach proof of Dr. visit if applicable)*

Illness _____

Funeral

Family Emergency

Vacation *(Unexcused)*

Other Please explain:

Parent Signature:

Date:

Please return excuse promptly. Student should bring an excuse to school the FIRST DAY he/she returns after an absence. (Please make copies as needed or download from www.swcsd.org)