



# STANN CREEK ECUMENICAL COLLEGE



## STUDENT ABSENCE FORM

**Note Well:** *This form must be completed by a Parent or Guardian only*

NAME OF STUDENT \_\_\_\_\_

FORM \_\_\_\_\_

DATE(S) WHEN STUDENT WAS ABSENT: \_\_\_\_\_

REASONS FOR ABSENCE: TICK { ☒ } ONE OR MORE:

●Illness {        }

- attach a medical certificate or prescription issued by a doctor; if not briefly state illness:

●Family Matter {        }

●Inclement Weather {        }

●Transportation Problem {        }

●Sent Home from School {        }

●Other (state briefly) {        }

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_