**Toongabbie West Public School**

Date

Dear Parent/Guardian

Your Child

Of class

Was absent on

Please complete the section below and return this sheet to the classroom teacher as soon as possible.

Thank you.

**Reason for Absence**

The reason for the absence must be shown below. (Please tick the appropriate box and give details.)

Sickness

Family reasons

Other reasons

Name of Parent/Guardian

Signature of Parent/Guardian

Date