NOTIFICATION OF STUDENT ABSENCE	
Student Name:	Year Level:
Homegroup Teacher:	
Date of Absence/s: On/ or up to and includi	ng/
Reason for Absence:	
Parent/Caregiver name:	
Parent Signature: [Teacher Signature:]  Please fill in and return to the school with your child/ren prior to absence or on their return to class.	
If there is a planned absence of a period which is of more than two sci	hool days, please obtain an ED175 (Application
for Exemption) form from the Front Office to be filled in pr	ior to leave happening. Thank you.
NOTIFICATION OF STUDENT ABSENCE	
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Homegroup Teacher:	Total 2000.
Date of Absence/s: On/ or up to and includi	ng / /
Reason for Absence:	
Reason to Absence.	·
Parent/Caregiver name:	
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planned absence of a period which is of more than two school days, please obtain an ED175 for Exemption) form from the Front Office to be filled in prior to leave happening. Thank you.