



**WATERBURY PUBLIC SCHOOLS**  
Waterbury, Connecticut

Date form issued to student \_\_\_\_\_

Name \_\_\_\_\_

Homeroom \_\_\_\_\_ ID# \_\_\_\_\_

**PARENT EXCUSE FOR STUDENT ABSENCE**

The following form must be completed by the student's parent or guardian for each and every absence. This form must be returned to homeroom teachers within three (3) days of the student's return to school. After three (3) days, this form will not be accepted and the absence will be UNEXCUSED for the purposes of truancy.

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date(s) of student absence (give month/day/year) \_\_\_\_\_

Date returned to school: \_\_\_\_\_ Date form returned to HR: \_\_\_\_\_

ReasonExplanation illness (doctor's note) illness (no doctor's note)

Describe illness: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

 religious holiday

Name of holiday: \_\_\_\_\_

 court appearance (document) court appearance (no document)

Reason for court appearance: \_\_\_\_\_

Court address: \_\_\_\_\_

Name of attorney: \_\_\_\_\_

Attorney's phone: \_\_\_\_\_

 funeral (obituary) funeral (no obituary)

Name of deceased: \_\_\_\_\_

Name of funeral home: \_\_\_\_\_

Funeral home address: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_