Notice of Year-End Absence

Student Name:	
Hor	neroom Teacher/Class:
Will be absent from school as follows:	
First Day Absent:	
Date Returning:	
Reason for Absence:	
	Student will be returning to Lakeview in September
	Student will <u>not</u> be returning in September. Student will be attending
	Name of School
Rep	oort Card:
	Canada Post – please provide stamped, self-addressed envelope
	Held at Office – parent will pick up in September
Date: _	

Parent/Guardian Signature