

# Life Church School Student Absence Form

Date of Absence: \_\_\_\_\_

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

Reason for Absence: \_\_\_\_\_

Signature of  
Parent or Guardian: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Principal's Signature  
\_\_\_\_\_

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Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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