



SAINT PIUS TENTH SCHOOL
 3000 Chili Avenue
 Rochester, New York 14624-4598
 Telephone: (585) 247-5650 Fax: (585) 247-7409

Absence/Late Excuse

To: _____
 (Homeroom teacher)

Date: _____

_____ was **absent** from school on: _____ due to the following reason:
Student's Name *Date(s)*

Illness (please be specific: sore throat, fever, strep throat, etc...)

Vacation

Family Emergency

Other: _____

_____ was **late** to school on: _____ due to the following reason:
Student's Name *Date(s)*

Doctor or Dental appointment

Overslept/Missed Bus

Other: _____

Signature of Parent/Guardian: _____

Reminders

- ❖ Please call the office (247-5650) to report your child absent as early as possible. You may leave a message on the school's voice mail system.
- ❖ If your child has strep throat, please keep him/her home until he/she has completed one full day of medication.
- ❖ For the safety and health of all our students, we ask that you keep your child home until he/she has been fever free for 24 hours.
- ❖ All medication, prescription and over the counter, must be brought to school by a parent or guardian with a doctor's order and parent/guardian's permission. Children are not allowed to transport medicine on the bus.

O:\Sign out sheets forms\Absence-Late Excuse.doc

THE CATHOLIC SCHOOLS OF MONROE COUNTY

Website: <http://www.saintpiustenthschool.org>

email: spxdcs@dor.org