

Claim # \_\_\_\_\_

## CONFIRMATION OF ABSENCE FROM SCHOOL

We would appreciate if you would complete this form to confirm the absence from school of the student listed below:

### **STUDENT ABSENCE**

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

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

### **NATURE OF THE ABSENCE**

TOTAL ABSENCE FROM SCHOOL:                       YES                       NO

If yes, please indicate the duration of absence: From \_\_\_\_\_ to \_\_\_\_\_

Absence has been only from physical activities:    YES                       NO

### **REASON**

Please provide the reason given by the student for the absence:

\_\_\_\_\_

School Stamp  
(with full name, address and telephone number)

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

We thank you for your cooperation.