Student's Name:	Grade:
Date(s) of absence:	
Reason for absence:	
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Parent's Signature:	
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If student is absent 3 or more consecutive parent note. Students without Doctor's no	days, a doctor's note with diagnosis must accompany this ote are not admitted to the building.
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PRESENT THIS NOTE TO THE ATTENDANC	E OFFICE THE MORNING YOU RETURN.
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ACADEMY OF THE HOLY	ANGELS
ATTENDANCE OFFICE	ANGELS
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