



Toronto District School Board

YOUR SCHOOL NAME

Date: \_\_\_\_\_

My Child(ren) 1 \_\_\_\_\_ Room # \_\_\_\_\_

2 \_\_\_\_\_ Room # \_\_\_\_\_

3 \_\_\_\_\_ Room # \_\_\_\_\_

Will be leaving school temporarily—Last day of attendance \_\_\_\_\_

Country \_\_\_\_\_ Reason \_\_\_\_\_

Expected date of return \_\_\_\_\_

Name of Parent (please print) \_\_\_\_\_

Signature of Parent \_\_\_\_\_ Phone \_\_\_\_\_

**\*\*\*\*\* (or attach note provided by parent with signature)**

To be filled out by the Principal

\_\_\_\_\_ Program of study attached and reviewed by principal, student will remain on the register and in homeroom, G-Day can be used for attendance.

Or

\_\_\_\_\_ Extended absence with no program of study (over 15 school days) student name removed from class list and demitted from school

Or

\_\_\_\_\_ Student will remain in homeroom and will be marked absent (less than 15 days)

Confirmed by:

Principal's Signature

Cc. parent, OSR