

**PUPIL ABSENCE**

**PARENTAL CONFIRMATION FORM**

Pupil Reason for Absence

Dear Parent/carer

Your child has been absent from school and we have not received communication of the reason for absence.

Please can you complete and sign the form below.

|  |  |
| --- | --- |
| **Name:** | **No. of days off:** |
| **Dates of absence:** | **From: To:** |
| **Reason:** |
| **Signed:** | **Date:** |

***Please complete and return the above form to the school office as soon as possible or Email ndelfino@gotham.notts .sch.uk***

Thank you for your co-operation, this is part of our drive to improve and monitor attendance at school.

Janette Allen

Head Teacher