



PVPV/Rawlings Elementary School
Phone 547.8570 Fax 547-8575

Date _____

_____ will be / was

absent from school on _____ due to:

_____ Illness _____ Family Emergency

_____ Doctor's Appt. _____ Dentist Appt.

_____ Other _____

All vacation requests will result in "Unexcused" absences on your child's student record. Please see Pg. 16 of the Student Code of Conduct Book for 2013-14 year.

Student Name

Teacher's Name

Grade

Parent Signature



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