

Errol Village School "Where Eagles Soar" 3568 Egremont Road Camlachie, Ontario N0N 1E0 Mrs. Carole Scott, Principal Ms. Carolin Boersma, Secretary Tel: 519-869-4861 Fax: 519-869-8261

PARENTAL REQUEST FOR STUDENT ABSENCE Under 15 days

Date: _____

| I hereby request that | be excused from school from |
|-----------------------|--------------------------------------|
| to | inclusive, for the following reason: |

I understand that he/she is responsible for all regular school work missed during this period of absence. There will be no alternative program of study provided by the school and your child is responsible for the completion of the regular program activities and assessments.

Signature of Parent/Guardian:_____

Signature of Principal:_____