

ATTENDANCE NOTE – LATE/ABSENT

Please use this form to inform the Attendance and the Nurse's Offices at Great Neck South High School about your child's lateness or absence. It is recommended that you complete this form as soon as you realize your child will be absent. If your child is late to school, please complete the form as soon as you know their anticipated arrival time on the day of lateness. Please note, information received after 2:00 pm may not be reflected in the student's record on the same day.

1. Child's (legal) First Name: _____
2. Child's Last Name: _____
3. Child's Grade: _____
4. Date of Absence or Lateness: _____
5. Please indicate: _____ Absent **or** _____ Late
6. Time of Arrival at School (for lateness only): _____
7. If your child is sick, please indicate the reason below. If your child has a religious obligation, please list that obligation:

_____ Illness: List illness in "Other" below

_____ Dr. Visit: Doctor's Note required when student returns

_____ Religious Obligation: List in "Other" below

_____ Emergency Room Visit: Provide Reason in "Other" below

_____ Hospitalization: Provide Reason in "Other" below

Other: _____

8. Please indicate if, in regard to this absence/lateness, your child has seen a doctor and has been diagnosed with:

_____ Conjunctivitis (Pink Eye)

_____ Pertussis (Whooping Cough)

_____ Mononucleosis (Mono)

_____ Ringworm

_____ Flu (Tested Positive)

Other: _____

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Parent/Guardian Phone # or Email