



# Mater Christi

## Catholic Primary School

### LEAVE OF ABSENCE

Child's name: \_\_\_\_\_ Class: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Destination: \_\_\_\_\_

Reason for Absenteeism: \_\_\_\_\_  
\_\_\_\_\_

Date of Departure: \_\_\_\_\_ Date of Return: \_\_\_\_\_  
(from school) (to school)

Total number of school days absent: \_\_\_\_\_

Does your child attend Instrumental Music Lessons? \_\_\_\_\_  
(Music Teacher)

**PLEASE NOTE: Recommended homework whilst away from school - Reading; Journal; Mental Maths**

Are your School Fees up to date? Yes No

Signed: \_\_\_\_\_  
(Parents)

Signed: \_\_\_\_\_  
(Class Teacher/s)

Signed \_\_\_\_\_  
(Principal)

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

<b>Office use only:</b>	
Copy to Office <input type="checkbox"/>	Original to Teacher <input type="checkbox"/>