

**ST. FRANCIS CATHOLIC  
PRIMARY SCHOOL  
MELTON MOWBRAY**

**UNFORESEEN ABSENCE**

<b>Name of Child:-</b>
<b>Date(s) of Absence:-</b>
<b>Name of Class Teacher:-</b>

Please tick	Reason for Absence	Further Details
	<b>Illness</b>	

<b>Other reasons:</b>
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Parent Signature ..... Date .....