

EXCUSE SLIP FORM

INSTRUCTIONS: After filling out the form, please submit it to the Admin Counter or email to admissions@studentdeskims.org with the Subject: Excuse Slip – Student’s Name (Last Name, First Name, Middle Name).

Date Filed:		Date of Absence:		
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Student’s Name			
Sex		Level/Section	
Medical Certificate (if any)			
Reasons			

	Submitted by	Noted by	Approved by
Signature			
Name			
Date			