



St Mary MacKillop College

Absentee Message Lines –
Isabella Campus 6209 0110
Wanniassa Campus 6209 5240



PARENT NOTE TO EXPLAIN ABSENCE (To be submitted within 5 working days of absence)

Please use block letters

Student Name:			
Year Level:		PC:	
PC Teachers Name:			
Date/s of Absence:			

Type of Absence:

Please tick the appropriate box and in the space below give an explanation for the absence.

☐ Sick ☐ Leave ☐ Leave During the Day

Time Out: _____

Time In: _____

Explanation for the absence

Medical Certificate/Supporting Document Attached: ☐ Yes ☐ No

Parent/Guardian Signature:

Parent/Guardian Name Printed:

Parent Contact No:

Date:



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