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ABN 32 337 676 694 CRICOS Registration Number 03423G

## STUDENT TEMPORARY ABSENCE FORM

Date	
Principal Oakleigh Grammar	
Dear Mr Robertson	
I wish to inform you that my child,	/children will be absent from school due to:
From (date)	to (date)
Child	Year
Child	Year
Child	Year
Parent/Guardian Full Name	
Parent/Guardian Signature	
OFFICE USE ONLY	
Received (date)	_Scheduled absence entered on system (date)
Email informing Home Group Teacher	r/Year Level Leader/HOS/MS or SS Coordinator
HOS/Coordinator signature	
File in student file	





