



California Gully Primary School Extended Absence Form

To Whom it May Concern:

Due to _____
my child/children will be absent from school for an extended period of time.

Absence beginning: _____

Returning to school: _____

I request/do not request the school to provide an educational program and resources to support their learning during this time.

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Student Name: _____ Grade: _____

Name of Parent/Guardian/Caregiver:

Signature: _____ Date: _____

OFFICE USE ONLY

Has a copy of this documentation been provided and retained on school records?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has CASES21 Prior Notification process been completed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No