



Notification of child's absence from school due to illness.

Please complete this form and return it to the school office.

School name: **WOODCOTE PRIMARY SCHOOL**

Child's name:

Child's class:

Date of absence:

Date of return to school:

Number of days absent from school:

Description of illness/symptoms:

.....

Did your child visit a Doctor:

Doctors Name and Surgery:

Parents signature:

Parents name (printed):

Date: