ABI STUDENT ABSENCE / TARDY EXCUSE NOTE

Stud	dent's Name	Date(s) of Absence/tardy
(Last, First, Middle)		
	ent's/Guardian's	
Name (Last, First, Middle)		
Par	ent's Mobile Phon	e Number*
The purpose of this notice is to inform ABI with	regards to (circle	one): 1) an absence or 2) a tardy
The absence will be classified "Excused" only i one of the below and have the student turn the school.	•	-
☐ Personal illness of the student or a doctor	or's/dentist's appoin	tment.
\square Attendance would be detrimental to the	health of the stude	ent or others.
\square A serious illness or death in the student	's immediate family	necessitating absence from the Institute.
☐ Compliance with a court order or an ord from school.	er issued by a gove	rnmental agency mandating absence
☐ Scholarship interviews/college visitation:	s,	
\square Travel opportunity with educational ben	efits,	
\square Specialized educational experience,		
☐ ABI days missed as a result of an out-of-sch	nool suspension.	
\square Funeral, graduation, or wedding of an in	nmediate family me	ember,
 Other circumstances that are mutually a approved by the ABI Administrator. 	greeable to the pa	rent and Administrator and have been pre-
Whenever possible, attach a copy of the form	al documentation s	such as a doctor's note.
Parent's notes will be accepted for up to six (6) excused reasons for absences must be verified	•	
 Doctor or hospital note. Court or government mandated papers. Funeral brochures or programs. 		
Excused documentation should be submitted to Failure to do so may result in the absence or to		• • •
I hereby certify that the above information is a	ccurate and have a	ttached all available formal documentation.
Parent's/Guardian's Signature		Date
* A phone call to a parent may take place to ve	erify authenticity.	

