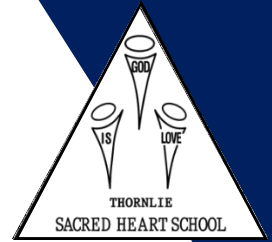


SACRED HEART PRIMARY SCHOOL

A.B.N. 67 740 132 912

GENERAL ENQUIRIES: **(08) 9251 3000**
ACCOUNTS: **(08) 9251 3002**
FAX: **(08) 9251 3090**

40 Ovens Road, Thornlie WA 6108
EMAIL: admin@shthorn.wa.edu.au
WEB: www.shthorn.wa.edu.au
@SHPSThornlie



NOTIFICATION FOR LEAVE OF ABSENCE

Child's Name: _____ Class: _____
Child's Name: _____ Class: _____
Child's Name: _____ Class: _____

Reason for Absence: _____

KINDERGARTEN – YEAR 6

Dates absent From _____ To _____

Total number of school days absent: _____

Please Note:

- Return this form to the School Office **NOT** directly to the classroom teacher
- Recommended homework while away: Reading and Mental Maths

Parent's Name: _____ Signature: _____

School Principal: Mr Steve Gibbs Signature: _____

Date: _____

Office Copy

Teacher's Copy

SEQTA UPDATED

