



Parramatta High School

Tel: 9635 8644

Fax: 9687 1139

email: parramatta-h.school@det.nsw.edu.au

ABSENCE NOTE

Name: _____ Class: _____

My Child was away from ___/___/___ to ___/___/___

The reason for the absence is:

Signed: _____ /___/___
(Parent/Carer) (Date)



Parramatta High School

Tel: 9635 8644

Fax: 9687 1139

email: parramatta-h.school@det.nsw.edu.au

ABSENCE NOTE

Name: _____ Class: _____

My Child was away from ___/___/___ to ___/___/___

The reason for the absence is:

Signed: _____ /___/___
(Parent/Carer) (Date)



Parramatta High School

Tel: 9635 8644

Fax: 9687 1139

email: parramatta-h.school@det.nsw.edu.au

ABSENCE NOTE

Name: _____ Class: _____

My Child was away from ___/___/___ to ___/___/___

The reason for the absence is:

Signed: _____ /___/___
(Parent/Carer) (Date)



Parramatta High School

Tel: 9635 8644

Fax: 9687 1139

email: parramatta-h.school@det.nsw.edu.au

ABSENCE NOTE

Name: _____ Class: _____

My Child was away from ___/___/___ to ___/___/___

The reason for the absence is:

Signed: _____ /___/___
(Parent/Carer) (Date)