



Blue Springs Elementary

16787 Hardy Road

Athens, AL 35611

Phone: 256-729-4092 Fax: 256-729-4097

Principal: Cade Baker /Email: cade.baker@lcsk12.org

Asst. Principal: Gregory Gray /Email: greg.gray@lcsk12.org

BLUE SPRINGS ELEMENTARY Parent/Guardian Note Excuse Form

Student's Name: _____

Date of Absence(s): _____

Teacher: _____

Dates of absence(s): _____

1. _____ Personal Illness (**Limit 10 during school year without doctor's excuse**)
2. _____ Hospitalization/Medical or dental appointment (**include medical excuse**)
3. _____ Emergency (**approved by principal**)
4. _____ Death in immediate family (Documentation Required)
5. _____ Court subpoena (Documentation Required)
6. _____ Religious holiday (**with prior written approval by principal**)
7. _____ Principal Approval Absence

Explanation: _____

Parent Signature: _____

Date: _____

Absences for reasons other than those listed above and for those lacking the appropriate supporting documentation will be deemed unexcused. Supporting documentation will not be accepted after 3 school days upon the student's return to school.

*******You may copy this form for future use.**

Thank You

Brandi Ball

Counselor/Attendance Clerk