



ABSENCE TARDY EARLY DISMISSAL

(CIRCLE ONE)

DATE _____ / _____ / _____

Student Number _____

My daughter _____, **was absent-**
(Print Full Name)

tardy-dismissed early on _____
(Days and Dates)

because _____
(Reason)

Parent's Signature

Time for Early Dismissal: _____

Transportation: _____

Please specify who will be picking up your daughter. If she will be driving please indicate.

PLEASE REFER TO THE CABRINI HIGH SCHOOL PARENT-STUDENT HANDBOOK, PAGES 17-19 CONCERNING ATTENDANCE.

**CABRINI HIGH SCHOOL
1400 MOSS STREET, NEW ORLEANS, LA 70119
(504) 482-1193**



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