

A NOTE FOR ST. JOHN'S SCHOOL

To: _____

From: _____

(Parent/Guardian Signature)

Date: _____

Student: _____

Check applicable box:

Is late due to _____

Will be picked up by _____

at _____ AM/PM

Will be going home with _____

Address/phone _____

Is returning to school after an absence of _____ day(s), due to: _____

Will be going to the After School Program, and picked up at _____ pm

Will be going to: Band, Basketball, Cheerleading, Scouts, Other _____

Other _____

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