

FORM: in case of absence from school

Ambrosius Grundschule

Hans-Eiden-Platz 2

54292 Trier

NAME: _____

KLASSE: _____

Herewith I would like to excuse

my son's/my daughter's _____, grade _____

absence on the _____ / from...to _____

(date)

(dates)

as he/she could not attend school for _____

(illness or other reasons)

Kind regards,

(place and date)

(signature)