

Bowman County Bulldogs

P.O. Box H 102 8th Ave. SW Bowman, ND 58623

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School Absence Form

Student Name:	Grade:
Sign-Out Date: Period:	
Sign-In	School Initials:
Date: Period:	
	School Initials:
PARENT Date:	APPOINTMENTS Date:
Time Absent From School:	Time of Appointment:
OR ALL DAY O Illness Family Business Other (please explain below)	Time Appointment Ended: Is the student to return to school? O Yes O No
SCHOOL USE ONLY: Tardy Excused	
Absent Unexcused	