

Sick/ Transportation/Appointment Notes

Date_____

Dear Mrs. Bailey and Li lao shi

My child _____(full name)

- Was/ will be absent on _____ because

- Was/will be late on_____ because

- Has a doctor/ dentist (circle) appointment at
_____ am/pm.
- I will pick up him/her at _____ am/pm. I will
present my Picture ID as required at pick-up.
- My child will be going home with _____
their phone number is _____. They will
present a Picture ID as required at pick-up.
- My child's transportation will be different today.
They will be _____ instead of
their usual transportation which is
_____.

Thanks,

_____(Parent signature)

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