

BUCKS COUNTY TECHNICAL HIGH SCHOOL
Official Absence/Late Excuse Card

BCTHS
Student Receipt

Student's Last Name First Name Homeroom Teacher Grade

Circle One: Absence/Late

Date(s) of Absence/Lateness _____

Reason for Absence/Lateness: _____

(Please use reverse side if additional space is needed)

Signature of Parent or Guardian

NOTE: This permit is ONLY for readmittance to school. It does not assure an excused absence. Excused absences are granted at the discretion of the Supervisor of Pupil Services.

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