Clear Lake Elementary

Report of Absence/Transportation Change Form

(please complete form and send to the office with your child)

Attn: _____
Homeroom Teacher

From: _____ _____
Parent's Name Signature

Day & Date: _____ _____/_____/_____

Regarding: _____
Student(s) Name

Report of Absence:

- ❑ Will not be or was not in school on _____
  Because_____
  _____
- ❑ Please have make up work:
  - o Sent home with_____
  - o Ready for pick-up by_____
- ❑ Will be late to school on _____ arriving after_____
  because_____
- ❑ Will be leaving early on _____ at _____
  for _____

Transportation changes for child care purposes that are different than regular schedule:

(circle one) Monday Tuesday Wednesday Thursday Friday

- ❑ My child will be picked-up after school by_____
- ❑ My child will be staying after school for_____
- ❑ My child will be getting off the bus at the High School for_____
- ❑ My child needs to ride Bus #_____ to_____
  Child Care Provider
- ❑ My child does not need to be picked up at his/her regular AM pick up on:
  Day_____ Date _____/_____/_____

This form is available on our website www.clearlake.k12.wi.us under the Elementary Tab and may be faxed to 715-263-3519.