

**BOYERTOWN AREA SCHOOL DISTRICT
BOYERTOWN, PENNSYLVANIA**

EXCUSE BLANK

Name of Pupil _____

Date of Absence _____ 20 _____

Date of Excuse _____ 20 _____

Reason for Absence _____

Signature of Parent
Guardian _____

**The Pennsylvania State Compulsory Law requires an excuse for every
absence or tardiness.**