



Fidel Wells
Principal

JSES Absence Form

Please complete and submit this form to the Attendance Clerk when
your child is absent.

Student's Name: _____
First Last

Student ID#: _____

Teacher's Name: _____ Grade: _____

Date(s) of Absence: _____

Reason for Absence(s): (Please check and/or explain)

- Illness
- Medical/Dental appointment (Note from Doctor's office is required for an excuse)
- Funeral (Specify relationship to Student): _____
- Religious Holiday (Specify): _____
- Other (Specify reason):

- Clearly explain the nature of the absence.
- Documentation must be received within five (5) days of student returning to school.
- If a student has an absence of four (4) or more consecutive days, a doctor's note is required.
- Absence notes can be emailed, faxed or brought in to the school by the student or a parent.
- Turning in documentation does not guarantee an excused absence.

Parent signature: _____

Parent Contact (email or phone): _____

Attendance Clerk: Nancy Craig
Tel: 281-634-9854 Fax: 281-327-4508
Email: AttendanceJSES@fortbendisd.com