



BRYSON Independent School District

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BRYSON ISD PRE-ARRANGED ABSENCE FORM

Student(s) name _____

Reason for absence _____

Date(s) of absence _____

If you will not be absent all day, time you are leaving _____

Signature of parent or guardian _____

Date of parent signature _____

Signature of principal _____

Excused, Unexcused, or Other (Principal will circle one)

Date of principal signature _____

Principal comments: