

## **ST. ANTHONY REENTRY AFTER ABSENCE**

To help provide a safe environment for the students, faculty & staff at St. Anthony School any student that is absent from school or dismissed by school faculty or staff for any reason must complete this form and return to the school office upon their return.

<b>STUDENT NAME</b>	
<b>DATE OF ABSENCE(S)</b>	
<b>REASON FOR ABSENCE</b>	
<b>CALLED PHYSICIAN</b>	<input type="checkbox"/> <b>Yes – DATE:</b> <b>Diagnosis / Instructions:</b>  <input type="checkbox"/> <b>No</b>
<b>VISITED PHYSICIAN</b>	<input type="checkbox"/> <b>Yes – DATE:</b> <b>Diagnosis / Instructions:</b>  <input type="checkbox"/> <b>No</b>

I acknowledge that my student is well and may return to school. He / she has not had a temperature greater than 100.4 for at least 24 hours without the use of fever reducing medication and is not exhibiting symptoms of illness Depending on the circumstances, authorization from a healthcare professional may be required to return to school.

<b>Parent / Guardian Name</b>	
<b>Parent / Guardian Signature</b> <b>Date</b>	