

Fillmore Central School
Note to School



Date: _____

To: ___ FCS PK-4 Office ___ FCS 5-12 Office

Student (first & last name): _____ **Grade:** _____

Is late due to : _____

Will be picked up by _____
at _____ am / pm Reason: _____

Will be going home with _____
On bus # _____ Off bus# _____
To: _____

Will report to the office at the end of the day to be
picked up by:

Will be staying after school for _____
(homework help, tutoring, basketball, music/band lessons
etc.) with _____

Is returning to school after _____ days due to illness.
Date absent: _____

Signature: _____

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