

FORM LETTER – TEN (10) DAYS OF ABSENCE (COMPULSORY AGE)

To the Parent/Guardian of _____:

The purpose of this letter is to inform you that your child, _____, has accumulated ten (10) days of absence. A detailed record is attached.

Nonattendance is a violation of the Compulsory Attendance Law of the Commonwealth of Pennsylvania and/or a violation of the Pine Grove Area School District's Discipline Policy Level 3, No. 1. If this pattern of attendance continues, a doctor's excuse will be required. For each day of absence past fifteen (15) days without a doctor's excuse, a citation will be filed with the District Magistrate if proper documentation has not been received. Please encourage your child to attend school regularly.

If you would need any further information or if you would like to schedule a conference, please contact me at the _____ office at 570-345-2731, ext. _____.

Thank you for your cooperation.

Sincerely,

Principal