

St. Leo the Great School

# A Note to School . . . .



To: \_\_\_\_\_  
(Teacher's Name)

Student: \_\_\_\_\_  
(Please Print - First and Last Name)

Date: \_\_\_\_\_

From: \_\_\_\_\_  
(Parent's Signature)

*(Check applicable box)*

will be picked up by \_\_\_\_\_  
(Mom / Dad / etc.)

\_\_\_\_\_ at \_\_\_\_\_ AM / PM  
(Date) (Time)

due to \_\_\_\_\_

will be going home with \_\_\_\_\_

\_\_\_\_\_  
(Name, Address and Telephone Number)

Comments: \_\_\_\_\_

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