

ADMISSION SLIP

Absent	
Tardy	
Ex.	
Un-ex.	
All day	
A. M.	
P. M.	
1	6
2	7
3	8
4	9
5	

This will admit:
 Name _____
(Please Print)
 Student I.D. _____
 Date _____
 _____ HR Teacher

Teacher's Class Signature by Periods	
1	
2	
3	
4	
5	
6	
7	
8	
9	

Remarks:

Months - Aug. Sept. Oct. Nov. Dec.
 Jan. Feb. Mar. Apr. May June

ABSENT OR TARDY - CHECK DAY																														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

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