



Excellence in Academics, Activities, and Character

Dear Physician,

At Park Elementary School, we value our partnership with physicians in our region and hope to work with you to assure children attend school every day possible.

You are receiving this letter because a patient you are seeing has reached the maximum of 10 days of absence according to our school's attendance policy. Without your verification, any absences will be considered unexcused per our school policy and continue to build toward Continuing Truant (3 unexcused days) and Habitually Truant (7 unexcused days) according to MN state statute.

Because school attendance has such a large impact on student achievement, we value your support in ensuring these absences are warranted and medically necessary. Should you wish to speak with me about this situation, please call 320-587-2837.

Thank you,

Lori VanderHeiden
Park Elementary Assistant Principal
320-587-2837
Fax: 320-587-4821

Name of Student (Please Print) _____

Grade _____

Name of Parent/Guardian _____

To Be Completed by Doctor or Licensed Medical Staff ONLY

Date(s) of Warranted or Medically Necessary Absence(s): _____

Reason for the Necessary Absence: _____

Printed Name of Doctor or Licensed Medical Staff _____

Signature of Doctor or Licensed Medical Staff _____

Date: _____

Clinic Name and Location: _____

Clinic Phone Number: _____