

**Loudoun Valley High School**

Phone: 540-751-2400

Fax 540-751-2401

Absentee Line 540-751-2402

Date: \_\_\_\_\_ Grade: \_\_\_\_\_ Student ID# \_\_\_\_\_

Student Name: \_\_\_\_\_

Is tardy because: \_\_\_\_\_  
\_\_\_\_\_

Early Dismissal Time: \_\_\_\_\_  
Reason: \_\_\_\_\_  
\_\_\_\_\_

***Note: Early dismissals and tardies for medical, dental, or judicial appointments require documentation from the medical/dental office or court.***

Parent Signature: \_\_\_\_\_

Thank you for using this form to communicate with the school.

Use this form instead of calling the school.