

Northeast Elementary School 425 Winthrop Drive Ithaca, New York 14850

A Note for School

Student Name:	
	Teacher:
Parent/Guardian Signature:	
Check the box that is needed. My Child	
is l	ate because
wi	ll be going home with
Bu	s # Address
wi	ll be picked up by
at	(time)
is 1	returning to school after an absence on the
fol	lowing dates
wa	s absent because