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| **TLSC Tumbi Umbi Campus**  **Student Leave Form – Whole Day’s Absence, one to five days** |
| |  |  |  | | --- | --- | --- | | **Student’s Name** | **Year** | **Roll Call Date** | |
| |  | | --- | | **Reason for absence and dates of non-attendance** | |  | |  | |  | |
| **Signed**                                                                          **Parent / Carer** |
| ***Persistent absence will result in a Student, Parent/Carer, HT Wellbeing Interview***  **Office use only:**    **Sick          Leave         Refer**    **Signed                                      Date** |

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