

**Walter Johnson High School  
6400 Rock Spring Drive  
Bethesda, MD 20814-1991  
Attendance Office 240-740-6901**

*Attendance Note*

(To be used for Absence, Early Departure or Late Arrival)

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

Student Id # \_\_\_\_\_

Grade \_\_\_\_\_

Date(s) \_\_\_\_\_

Absence

Early Departure      Time out: \_\_\_\_\_

Late Arrival      Time in: \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

Parent/Guardian Phone Number \_\_\_\_\_

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