

**SIXTH FORM STUDENT SELF CERTIFICATION FORM**

**(for use in case of sickness and unforeseeable absence)**

This form should be completed by a student returning to school after any unforeseeable absence and should account for absences of up to 5 continuous days. A doctor's note is required for longer periods of illness. Full reason for absence must be given – 'sick' and 'ill' are not acceptable.

**Please remember this form must be signed by a parent/guardian/responsible adult explaining your reason for absence, and by your form tutor.**

**SURNAME** ..... **FORM** .....

**FIRST NAME** .....

I certify that I was unable to attend school on:-

**FROM (day & date)** .....

**TO (day & date)** ..... **(inclusive)**

**NUMBER OF DAYS / PERIODS** .....

The reason for my absence was .....  
.....  
.....  
.....  
.....

Did you consult your doctor on this occasion? YES / NO

**STUDENT SIGNATURE** ..... **DATE** .....

**PARENTAL SIGNATURE** ..... **DATE** .....

**FORM TUTOR SIGNATURE** ..... **DATE** .....