



REPUBLIC OF CYPRUS  
MINISTRY OF EDUCATION  
SPORT AND YOUTH

YPAN DDE 02A

DEPARTMENT  
OF PRIMARY EDUCATION

PRIMARY/ PRE-PRIMARY / SPECIAL SCHOOL .....

TELEPHONE NUMBER .....

E-MAIL .....

SCHOOL YEAR .....

### PUPIL'S ABSENCE SLIP

Headteacher,

I would like to inform you that my child was absent from school and that his/her absence(s) be considered justified due to the reasons reported below.

1. PUPIL'S FULL NAME: .....

CLASS: .....

CLASS TEACHER'S FULL NAME: .....

2. DATE(S) OF ABSENCE(S)

.....  
.....

3. REASON FOR ABSENCE(S)

.....  
.....  
.....  
.....

4. I ATTACH RELEVANT DOCUMENTS (e.g., medical certificate, medical report) /

I DO NOT ATTACH RELEVANT DOCUMENTS *(Please delete accordingly.)*

Sincerely,

Parent/Guardian's name: .....

Mobile telephone number: .....

Signature: .....

Date: .....