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Form SEA-13

Excuse for sick day(s) without medical certificate

To be submitted on the 1st day of absence

I, the undersigned _____
First name and _____
Surname of legal guardian of the child

would like to excuse my child

_____ and _____
First name Surname of the child

due to illness from _____ to _____ (max. 2 days).

Place:

Date:

Signature of legal guardian

For administrative use	
Form submitted	on ____ / ____ / ____ at ____ a.m. / p.m.
Submitted (via/by/in)	<input type="checkbox"/> email <input type="checkbox"/> post <input type="checkbox"/> hand <input type="checkbox"/> letterbox vestibule