Ref. No.:	
Date:	

ABSENCE JUSTIFICATION FORM	To School of European Education of Heraklion
(GUARDIAN)	Administration
LAST NAME:	Please accept the attached documents to justify the
	absences of, pupil of the
NAME:	class.
	Days of absenceto
GUARDIAN'S STATUS:	
ID No. or PASSPORT NO.:	
	Heraklion,
ACCOMPANYING DOCUMENTS	
1. Solemn declaration, Law 1599/1986	
2. Medical certificate: (YES/NO)	The applicant
3. RAPID TEST/PCR: (YES/NO)	
4. Other:	
	1