

# SCHOOL EXCUSE

## KATHY WAGNER COUNSELING SERVICES, LLC

Braelinn Office Park  
262 S. Peachtree Parkway, Suite 4  
Peachtree City, GA 30269

Please excuse \_\_\_\_\_ for being absent from school for  
*(Name of student)*

a medical appointment on \_\_\_\_\_.  
*(Date)*

Comments:

\_\_\_\_\_  
Kathy Wagner, MA, LPC

\_\_\_\_\_  
Date