

Medical Appointment Permission Template

Subject: Permission for Early Dismissal - Medical Appointment

Dear [Teacher's Name/Principal's Name],

I am writing to request permission for my child, [Student's Name], to leave school early on [Date] at [Time] for a medical appointment.

[Student's Name] is enrolled in [Grade/Class] and has a scheduled appointment with [Doctor/Specialist] at [Time]. The appointment is necessary for [brief reason - routine checkup/follow-up treatment/etc.].

I will personally pick up my child from the school office at [Time]. Please excuse any missed classwork, and I will ensure [Student's Name] catches up on any assignments.

Thank you for your understanding and cooperation.

Sincerely,

[Parent's Name]

[Contact Information]

[Date]

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