Ensemble Rehearsal Absence Form

Pre-Arranged_____ After The Fact____

Student Name	
Instrument	
Grade	
I am officially informing the pe	erforming arts department of my
Anticipated absence abse	
Rehearsal	
Performance	
on //	
···:	
This request is for the followin	a reasons
-	g EmergencyExtenuating Circumstances
(r lease explain specific)	
Student Signature	Date
Parent Signature	Date
Pre-Arranged	
rehearsal and two weeks in advance for per approved no less than two days in advance After The Fact Note: Attach physicians completed and on file with director within 3	nds. This approval process must begin one week in advance for formance. In any event, forms must be completed and for rehearsal and ten days in advance for performance. note or other document where applicable. This form must be days of the student returning to school. Late forms in general S FORM IS REQUIRED EVEN IF THE PARENT OR STUDENT SPEAKS
Director:ApprovedDe	enied Make-up assignment required
Director's Signature	/
Director's Comments	
Make-Up Assignment: Completed on :	Checked bu: