

Rehearsal Absence Form Pre-Arranged____ After The Fact____

Student Name
Instrument
Grade
I am officially informing the orchestra department of my
anticipated absenceabsence from orchestra
Rehearsal
Performance
on/
This request is for the following reasonsPersonal IllnessFamily EmergencyExtenuating Circumstances (Please explain specific details)
Student Signature/Date
Parent Signature /Date
Pre-Arranged
This form is to be placed in the directors hands. This approval process must begin one week in advance for rehearsal and two weeks in advance for performances. In any event, forms must be completed and approved no less than two days in advance for rehearsal and ten days in advance for performances.
After The Fact Note: Attach physicians note or other document where applicable. This form must be completed and on file with
the director within 3 days of the student returning to school.
Late forms in general are not accepted without penalty. Note: THIS FORM IS REQUIRED EVEN IF THE PARENT OR STUDENT SPEAKS WITH THE DIRECTOR ABOUT THE ABSENCE.
Orchestra Director:ApprovedDeniedMake-up assignment required
Orchestra Director's Signature Date
Orchestra Director's Signature Date
Director's Comments:
Make-up Assignment: Completed on: Checked by: