

REQUEST TO MISS PERFORMANCE

Please fill out this form in its entirety and return to Ms. Michael at least **10 class days** in advance of your absence. Form **must** be signed by both student and parent. Work or appointments are not considered acceptable reasons for absence. Performances are equivalent to a final semester grade.

Student: _____

Performance Date You Will Miss: _____

Reason for Absence: _____

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Parent Phone Number: _____

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For Office Use Only

_____ Absence Excused

_____ Absence Unexcused

_____ Other