

“EXCUSED ABSENCE” REQUEST FORM – LNHS ORCHESTRAS

Name: (Last) _____ (First) _____ Grad Year _____

Orchestra: _____ Instrument: _____ Phone: _____

List the date and hours of any orchestra practice you miss, or wish to miss, that you feel meets the criteria for an excused absence. **Requests for pre-arranged absences should be filed as soon as a conflict is identified and will rarely be excused when notice is given at the last minute except in emergency situations.** Please turn in requests a **minimum of ten (10)** school days before conflict date. Be specific when stating the reason for your absence and include enough information for a decision to be made. Please attempt to **arrange your schedule** to attend all practices and resolve conflicts whenever possible. We have a progressive rehearsal schedule that includes new material and/or changes at each rehearsal. **A student’s work schedule is not considered an excusable reason to miss practice.** Orchestra schedules are set very early to allow students the necessary time to arrange other activities, work schedules and/or doctor’s appointments. Thank you for supporting your son/daughter in a great youth activity and please help them with the responsibility of managing their team calendar. **All performances and practices as listed on the LNHS orchestra calendar and are required of all students.**

Date(s) of absence: _____ Total hours missed: _____

State reason(s) for absence - Please be specific – List team & coach’s name when conflict is for LNHS sports practice:

Parent Signature: _____ Date: _____

(For Director Use Only)

Date request received: _____ Emergency Situation: YES NO

() Request approved – No make up necessary

() Request approved – Make up required (Due one week from date assigned)

Make up assignment will be: _____

() Request denied – Student will not receive credit for time missed

Director Signature: _____ Date: _____