



Cass Band Absence Request Form

This form is to be turned in ONE WEEK prior to expected absence. Regardless of reason for absence, students will be marked *unexcused* if form is not completed. This will result in a half letter grade deduction as per syllabus and member contract. Thank you for your efforts in keeping the band program rehearsals run smoothly!
This form is not valid for performances (games and competitions)! Thank you.

Student Name: _____

Date of Absence: _____

Reason for Absence: _____

Student Signature: _____

Parent Signature: _____

Band Director Approval: Yes ___ No ___

Band Director Signature: _____

Tear Here (Director Keeps This Half)

.....

Tear Here
This Half Completed By Director and Returned to Student

Student Name: _____

Date Requested: _____

Band Director Approval: Yes ___ No ___

Reason, If Not Approved: _____

Band Director Signature: _____

Reasons a Request Would Not Be Approved

- Regular Doctor's Appointments (Dentist/Eye/Check-Up)
- Birthday
- Homework
- Scheduled Work
- Scheduled on a Performance
- Late Submission of Form