

Bridgeport High School Marching Band

2016-2017 PERFORMANCE / REHEARSAL EXCUSED ABSENCE REQUEST FORM

THIS FORM SHOULD BE SUBMITTED AT LEAST **TWO WEEKS** PRIOR TO THE SCHEDULED ACTIVITY

Today's Date _____

Student's Name _____ Grade _____

Instrument or Position _____

I am requesting permission for my son/daughter to be excused from the activity listed below. I understand that any missed activity will require the student to make up the number of points assigned to that activity or have a reduced number of points/grades for the grading period.

_____ on _____
INDICATE THE SPECIFIC PERFORMANCE EVENT OR REHEARSAL HERE DATE OF THE EVENT

Briefly state the reason you are requesting your child be excused from this Scheduled Band Activity below.

Parent's Signature _____ Phone # _____

REQUEST FOR EXCUSED ABSENCE GRANTED BY MR. HAYSLETTE ON _____

REQUEST FOR EXCUSED ABSENCE DENIED BY MR. HAYSLETTE ON _____

REQUEST FOR EXCUSED ABSENCE GRANTED BY MISS BOHN ON _____

REQUEST FOR EXCUSED ABSENCE DENIED BY MISS BOHN ON _____

REASON FOR DENIAL:

THIS FORM WILL BE KEPT ON FILE FOR REFERENCE DURING THE BAND SEASON

ALL BAND MEMBERS SHOULD RETURN THIS FORM TO MR. HAYSLETTE OR MISS BOHN