

# ABSENCE MAKE-UP FORM:

Name \_\_\_\_\_ Quarter (circle 1) 1 2 3 4

Dance Period: \_\_\_\_\_ Level: \_\_\_\_\_

Dates Absent \_\_\_\_\_

Total Hours of Practice (30 minutes for every class missed) \_\_\_\_\_

Briefly Describe the Activity:

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Student Signature \_\_\_\_\_

Parent Signature \_\_\_\_\_

Parent's Phone Number \_\_\_\_\_