



LEAVE-OF-ABSENCE FORM

My **child**, _____, will be away for the lesson dates listed below **due to**
_____. My teacher has approved this absence.

Dates that will be missed: _____

Signed (parent) _____ **Date** _____

Signed (teacher) _____ **Date** _____

Please remit completed form to Jeanne Rosecrans in the Community Music School Office in Kohl 309, 77 West College Street, Oberlin, Ohio 44074 or leave for Louise Zeitlin in her mailbox at the Burrell-King House.