



Make-up class form:

Please fill in all fields and submit completed form to the office staff

Student's name: _____ (Please print)

Subject: _____

Missed class Information: The class I missed was on _____ (day of the week)
_____ (Date) at _____ (Time) in _____ (Studio), and my teacher is
_____ (teacher's name)

Make-up class Information: The class I am making up is on _____ (day of the week)
_____ (Date) at _____ (Time) in _____ (Studio), and my teacher was
_____ (teacher's name)

Teacher's Signature: _____



Make-up class form:

Please fill in all fields and submit completed form to the office staff

Student's name: _____ (Please print)

Subject: _____

Missed class Information: The class I missed was on _____ (day of the week)
_____ (Date) at _____ (Time) in _____ (Studio), and my teacher is
_____ (teacher's name)

Make-up class Information: The class I am making up is on _____ (day of the week)
_____ (Date) at _____ (Time) in _____ (Studio), and my teacher was
_____ (teacher's name)

Teacher's Signature: _____