THE UNIVERSITY OF IOWA
Explanatory Statement for Absence from Class

1. Student name and student number

2. Department, course and section Date of Absence

3. Name of Instructor

4. Reason for absence

5. In case of absence due to illness, answer the following:
   (a) Did you visit the Health Service? When?
   (b) Did you see another doctor?
       Doctor's name
   (c) If your answers to (a) or (b) are "NO", can you give the name of someone who can vouch for the fact that you were ill?
       Name of person
       Address
       Telephone number

I certify that the above facts are true to the best of my knowledge and belief and I understand that I subject myself to disciplinary action in the event the above facts are found to be falsified.

__________________________
SIGNATURE

__________________________
DATE

Have you discussed this absence with Dr. Heidel? YES NO

Have you made arrangements for someone to substitute for you during this rehearsal? YES NO

_________________________________________ will substitute for me during the above rehearsal.

**Remember to give your music to the substitute player!!**