

APPLICATION FOR LEAVE OF ABSENCE OF SCHOOL CHILD

Please refer to the School's Policy Statement on Holiday Absence from School (Summer Mailing to Parents 2011). It is important that you read the policy before completing and returning this form.

Note: The Parent/Guardian should send this application to the Headteacher at least 4 weeks before the first day of requested absence.

Dear Mr Wilmot

I desire that my child Tutor Group

shall be granted leave of absence for the purpose of

Have you requested such exceptional leave before? YES / NO Dates:
Would you anticipate needing to do so again? YES / NO

Please detail here why you consider it essential for your child to have this exceptional leave of absence from school during term-time and why this planned activity covered by the dates below cannot take place during normal school holiday time.:

From: to: (give inclusive dates)

Total Number of days your son/daughter will be absent from school:

Signature of Parent/Guardian: **Date:**

Address:

..... Postcode **Daytime Tel No:**

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A copy of the form completed above will be returned to the applicant showing the Headteacher's decision, below:

[Any absence not agreed to will be recorded as *unauthorised* in the register.]

Leave of Absence agreed to / Leave of Absence not agreed to

Headteacher: **Date:**

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Pastoral Clerk (date) HOY signature

Events Roll Call Copy to Tutor