



ICS
INTERNATIONAL
COMMUNITY
SCHOOL

REQUEST FOR LEAVE OF ABSENCE IN THE SCHOOL TERM

Please send this completed form to the school Principal at least 2 weeks before the absence is due to start.

NAME OF STUDENT(S) _____

YEAR GROUP(S) _____

REASON FOR APPLYING FOR LEAVE OF ABSENCE IN TERM TIME

Does the student have brothers or sisters at both the Primary and Secondary School? Yes / No

Please specify the dates of the absence:

Absence leave from _____ to _____

Name and Signature of Parent /Guardian _____

Date _____

Name and Telephone number of relative/friend who the school can contact if needed, during the absence

The school will consider the following points:

- The student previous attendance history
- The age of the student
- The student's stage of education
- The nature of the trip (an exceptional/cultural experience)
- The time of year
- If there is a fixed return date
- If previous holidays have been applied for, what length have they been

Office use only

Seen by School Principal

Agreement reached

Other points

Authorised/Unauthorised

Date: