



LEAVE OF ABSENCE REQUEST FORM

Please complete this form for all absences from school except illness.
You must ensure that supporting evidence is submitted with this form.

This form will need to be returned to the school office 10 days prior to the absence, where practical.

The Education Act 1996
“Parents are to perform their legal duty by ensuring their children of compulsory school age who are registered at school attend regularly”.

Student Name(s):	Tutor Group:

Requested dates of absence from: _____ to: _____	
Date of proposed return to school: _____	
Number of school days: _____	
Reason for exceptional leave <i>(please provide full details)</i> :	
Address whilst away <i>(if applicable)</i> :	
Name of main contact and relationship to student whilst away:	Contact number:

Signed by parent/carer:	Date:
Signed by parent/carer:	Date:

**Authorisation for leave of absence will only be granted in exceptional circumstances.
In line with the School’s Attendance Policy, the school reserves the right to decline absence requests.**



THIS SECTION COMPLETED BY THE SCHOOL

Child's name:

Attendance Percentage	This year:	Previous year (if applicable):
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Your child has a record of _____ days of unauthorised absences this year.

Your child has a record of _____ days of authorised absences this year.

Child's name:

Attendance Percentage	This year:	Previous year (if applicable):
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Your child has a record of _____ days of unauthorised absences this year.

Your child has a record of _____ days of authorised absences this year.

Child's name:

Attendance Percentage	This year:	Previous year (if applicable):
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Your child has a record of _____ days of unauthorised absences this year.

Your child has a record of _____ days of authorised absences this year.

Your child(ren)'s absence has **NOT** been authorised for _____ days. If you decide to take your child out of school without the Headteacher's authorisation, you will be referred to the Education Welfare Service and you may receive a Fixed Penalty Notice of £60.00 per child, per parent.

Your child(ren)'s exceptional leave of absence **has** been authorised for _____ days.

Headteacher's comments:		
Attendance code:	Signed:	Date:

Ms N Williams (Headteacher)

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