

APPLICATION for PARENTS / CARERS FOR LEAVE OF ABSENCE DURING TERM TIME

Surname of child	
First name / names of child/ren	
Date of birth	
Class and Year group	
Full name of parent /Carer	
Does the child/ren reside with you full time?	YES / NO
Home address of child	
Emails address of parents / carers	
Telephone number/s	
Does your child have any siblings for whom you are requesting absence in term time from any other schools?	YES / NO If yes, please give the child's name and school
Date(s) of requested absence	From: To: Total number of school days missed:
Reason for requesting absence in term time	
I can confirm that I am aware of the legal expectations regarding absence from school.	
Parent / Carer signature:	
Date:	
If this request is unauthorised, a referral may be made to the Educational Welfare Service, following guidance and a penalty fine could be incurred (see Attendance Policy)	
For school office use only	
Has he/she/they been absent, due to term leave (holiday etc), for more than a three day period in the last 3 years?	YES / NO If yes, detail dates below
Current Attendance %	
Headteacher signature:	Authorised /Unauthorised
Date:	