



### Application for Leave of Absence During term time

Please complete, sign and date this request and submit to the school office **two weeks prior** to the requested date of absence.

Name(s) of Child(ren)	Class	Class Teacher	Mobile Contact Telephone Number
1.			
2.			
3.			
4.			

**Reason for leave:**

**Dates of leave:**

**From:**

**To:**

**No. of days:**

Please state why this leave of absence needs to be taken during term time. If this is a holiday, please state your destination.

**Declaration:**

I understand that this holiday request may be authorised or unauthorised, and the Headteacher will use their discretion in making the decision based on my child's circumstances. If the Headteacher does not authorise this holiday, this may lead to a request for a Fixed Penalty Notice to the Local Authority Lead EWO which will be determined in line with the school's attendance policy which can be found on our website.

<b>Signed:</b>	<b>Print name:</b>
<b>Relationship to child:</b>	

**OFFICE USE**

To be completed by the Headteacher within at least 1 week from the request.

Current attendance:	Attendance last school year (if application made in autumn term):
Authorised absences:	Unauthorised absences:

**Authorised:**

<b>Your request for authorisation of the above absence period during term time:</b>	
Has been authorised (subject to good attendance up to the time of the date of leave)	
Compassionate reasons, e.g. bereavement, wedding	
Other (please state)	

**Unauthorised:**

<b>Your request for authorisation has not been authorised because of:</b>	
Overall rate and patterns of attendance	
Concerns about progress, attainment and impact on learning	
Your child has already been granted a leave of absence this year	
Other (please state)	

Additional comments
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A completed copy of this form will be returned to you so that you may retain a copy for your records.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_