



Mr K Reid Headteacher B.Ed. (Hons), NPQH

Application for leave of absence during term-time

Please complete this application form at least one week before the start of absence and return to the school office.

Once the office receives the form, please allow 72 hours for the request to be processed.

This school's policy is not to authorise leave of absence during term-time. Any applications for leave in term-time must be made in writing to the Headteacher. The Headteacher may not grant any leave of absence during term-time unless there are exceptional circumstances and evidence is provided. Please note that evidence from abroad is not accepted. If the leave is granted the Headteacher should determine the number of school days a child can be away from school. In this school that discretion will only be exercised in the most exceptional circumstances.

| Date of application: | | | | |
|---|-----------------------|-------------------|------------------------------------|--------------|
| Child's name: | Year: | Class: | Attendance: | |
| Child's name: | Year: | Class: | Attendance: | |
| Child's name: | Year: | Class: | Attendance: | |
| Start date of absence: | | | | |
| Date of return to school: | | | | |
| Number of days requested: | | | | |
| Reason for absence: | | | | |
| I agree to complete a holiday diary if | requested by the Hea | dteacher: | Yes No | |
| | | | ool's agreement a Penalty Notice w | |
| issued as a result of this absence. You holiday without school agreement. | ou may also receive a | tine it you delay | your return from an extended term | <u>-time</u> |
| | | | | |
| Parent/Carer Signature: | | | - | |
| | | | Time Received: | 100 |
| Headteacher to complete within 72 hours | | | School Received Date Stamp: | |
| Absence | authorised | | | |
| Absence | unauthorised | | | |
| | or over 10 days) | | Office Staff Signature: | |
| Headteacher's remarks: | | | | _ |
| | | | | - |
| Holiday diary to be given: YES | NO NO | | | |
| Headteacher's signature: | | | | |