

This should be completed before booking any travel arrangements

To be completed by the Parent / Guardian

Pupil's Name _____ Registration Group _____

Address _____

Ethnicity _____ Date of birth _____

Date of absence request From ____ / ____ / ____ To ____ / ____ / ____

Reason for application (needs to be exceptional circumstances)

1st Parent / Guardian details

2nd Parent / Guardian details

First name _____ First name _____

Surname _____ Surname _____

Address _____ Address _____

Contact number _____ Contact number _____

Date of application ____ / ____ / ____

I have read the schools leave of absence policy document

Parent / Guardian 1 signature _____ Date: _____

Parent / Guardian 2 signature _____ Date: _____

For schools use only

Current attendance (must be at least 97%) _____ No. of term days requested _____

If the child has had previous term time leave, please state dates and number of days taken

Leave agreed / Not agreed Date of letter confirming the decision posted to parent _____

Reasons _____

If leave is to be authorised, the following must be completed

Travelling abroad? Yes / No Country _____ Return date: ____ / ____ / ____

Proof of return date (*tickets/e mail etc.*)_____