



APPLICATION FOR LEAVE OF ABSENCE OF CHILD FROM SCHOOL

I, the undersigned, being the parent or guardian of:

Name of Child:Class/Form.....

Address:

.....

I request permission for my child to be granted leave of absence from school between:-

First Day of Absence	
Date of Return	
Total School Days	

Please fully explain the **exceptional circumstances** relating to the leave of absence you would like the Head Teacher to consider. *(Continue on a separate sheet if necessary).*

.....

Declaration

I have read and understood the information regarding leave of absence during term time, unauthorised absence, Penalty Notices and prosecution. I am aware of the possible consequences should I take my child on leave of absence without the prior authorisation of the Head Teacher.

Date.....**Signature**.....

Parent/Carer(s)

.....

This form is to be completed by the Parent/Carer and forwarded to the Headteacher of the school which the child attends, as least two weeks before the period for which leave of absence is requested.

Your application for the leave of absence of your son/daughter is/is not authorised.

Date

Signature of Headteacher

Please note – under the Education (Pupil Registration) (England) Regulations 2013 headteachers may not grant any leave of absence during term time unless there are exceptional circumstances.