



LEAVE OF ABSENCE FORM

A request for absence should be made in advance at least 5 days before the proposed leave of absence

PUPIL DETAILS				
NAME:		Date of Birth		
		Date of Birth		
Class/Teacher				
Class/Teacher				
Datas of requested absonool				
Dates of requested absence:				

Date of return to school:

Reason for leave of absence request:

I understand that keeping my child off school if my request is not granted, will result in the absence being recorded as Unauthorised. This may result in a Penalty Notice being issued to me by the Local Authority for the non attendance of my child at school.

Parent/Carer Name:			
Relationship to child:			
Signature:			
Date of Request:			
Office Use			
Seen byAgreement			
Date			
school achievement award			

REWARDING

Healthy School