Leave of Absence Form



I have parental responsibility for the following student and I am requesting authorisation for them to be absent from school as detailed below:

NAME OF STUDENT:	YEAR Class
ABSENCE DATES: From/	/ to (Inclusive)
TOTAL SCHOOL DAYS TO BE ABSENT:	
The reason that this absence is being requested during term-time is because:	
Signed:	(Parent/Carer) Date:
Name(s) of brothers/sisters in other schoo	ls:
Name:	School
Name:	School
(PARENTS/CARERS PLEASE ALSO CO	MPLETE YOUR PART OF THE REPLY SECTION BELOW) REPLY SECTION
NAME OF STUDENT:	 YEAR FORM
REQUESTED ABSENCE: From	/ to / (Inclusive)
HEADTEACHER'S DECISION	
Your request is authorised on this	occasion
*Your request is NOT authorised of	on this occasion because:
* Parent/Carer may receive a Fixed l	Penalty Notice if you take your child out of school
Signed:	Date:

(If not the Headteacher's signature then the person signing this form is authorised to do so.) **Copies to: - Parent/Teacher/Attendance File**