



**REQUEST FOR LEAVE OF ABSENCE FROM SCHOOL DURING TERM TIME**

*This should be completed before booking any travel arrangements*

**To be completed by the Parent/Guardian**

Pupil's Name (s): \_\_\_\_\_

Class Group \_\_\_\_\_ Date of Birth (s): \_\_\_\_\_

Date of Absence Request:

From \_\_\_\_/\_\_\_\_/20\_\_\_\_ To \_\_\_\_/\_\_\_\_/20\_\_\_\_

Reason for application (please continue overleaf if required):

\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Date of application: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please return to school, via the school office. We aim to respond within 10 working days.**

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**For School Use Only**

Current Attendance (must be at least 97%) \_\_\_\_\_ No of term days requested \_\_\_\_\_

Number of days of leave already taken: \_\_\_\_\_

Leave Agreed / Not Agreed Principal: \_\_\_\_\_

Date of decision letter sent to Parents: \_\_\_\_\_

If authorised:

Travelling Abroad? YES/NO Country: \_\_\_\_\_ Return Date: \_\_\_\_\_

Proof of Return Date(tickets, email etc.): \_\_\_\_\_