

Request for Leave of Absence



PARENTAL REQUEST FOR PUPIL ABSENCE FROM SCHOOL

Parents should be aware that any absence from school, for whatever reason, would have a detrimental effect on the child's learning and progress.

Only in **EXCEPTIONAL CIRCUMSTANCES** should parents apply for their child's release from school for **ANY REASON**.

Should this be necessary, please complete the form below and return it to your child's school address

*No later than **8 weeks** prior to the essential absence*

Pupil's Name:	Form:
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Absence requested from (start date):	To (end date):
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Reason for this request:

I request permission for my child to be absent from school on the above dates. I understand that this absence will disrupt my child's learning and I will ensure that my child completes all work that they miss as a result of their absence. I understand that if my child misses an external examination through absence I will be required to pay for the examination fees.

I am aware that my child will be removed from school roll if he/she is out of school for more than 20 consecutive days, and details of any holiday taken will be passed on to the Education Welfare Service.

Signed (<i>Parent/Guardian</i>):	Date:
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For school use only

Date received:

Attendance percentage to date:	Reception	Y1	Y2	Y3	Y4	Y5	Y6
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Previous requests:	Reception	Y1	Y2	Y3	Y4	Y5	Y6
	Y N	Y N	Y N	Y N	Y N	Y N	Y N

Request approved/denied:	APPROVED	DENIED
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Signed:	Date parents informed of decision:
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