



I understand that you have requested leave of absence from school for your child. Absence from school for any reason other than medical absence is not automatic. Please refer to our attendance policy on the school website for further information. You may be invited into school to discuss your request with the Headteacher.

**PUPIL ABSENCE FROM SCHOOL DURING TERM TIME – REQUEST FOR AUTHORISATION**

Name of child ..... Class.....

**PART 1 – TO BE COMPLETED BY THE PARENT/CARER – please complete all sections**

a. I would like you to consider the following **exceptional circumstances** for authorising my child’s absence from school during term time. **This absence is unavoidable because (please attach any supporting evidence):**

b. The **first day of school** my child will miss is.....

My child will **return** to school on.....

c. I understand that if my child does not return to school on the date stated above the further absence will be marked as unauthorised and I may risk losing my child’s place at the school. If I am delayed for any reason, I will contact the school immediately.

**Signed**..... (parent/carer)                      **Date:**.....

**PART 2 – TO BE COMPLETED BY THE SCHOOL**

Evidence provided for exceptional circumstance                      Yes / No

Arrange to meet with Parent/Carer?                      Yes / No                      Date & time .....

**Authorised**                                            **Unauthorised**                     

Headteacher’s comments:

Signed.....

**Mr. P. Sutton (Headteacher)**