



Leave of Absence

Request Form

Child's name: (Please complete one form per child)	
Class:	

	Parent/Carer 1	Parent/Carer 2
Full name of all parents/carers:		
Address of all parents/carers:		
Contact telephone numbers:		
First language (if not English):		

Start date of absence:	
Date of return to school:	
Reason for absence:	

I understand that a penalty notice may be issued if my request is denied and my child is absent during this period.

Signature (Parent/Carer 1) :		Date:	
Signature (Parent/Carer 2) :		Date:	



To be completed by the school office:

Total days requested:			
Previous periods of leave:			
Current attendance:	%	Previous attendance: (e.g. last year, as appropriate)	%

To be completed by the Headteacher:

Decision: (AGREED or REFUSED)	
Reason(s) for decision:	

Signature (Headteacher) :		Date:	
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