

Application for Special Leave of Absence in Term Time

Name of Pupil: _____ Room: _____ D.O.B: _____

Address: _____

I wish to apply for leave of absence for my child:

From _____ (day) _____ (Month) _____

To _____ (day) _____ (Month) _____

Reason for absence – Please include details of External Organisations if Applicable.

I understand that leave during term time will be recorded as Explained / Unjustified unless there are exceptional circumstances. Where the circumstances are deemed as exceptional the individual request will be considered by the School Principal and or the School Board of Trustees.

Parents/Carers will be notified of the decision by email.

Signed _____ (Parent/Carer of child) Dated _____

Office Use:

Attendance Current year% _____ Late% _____ L

Teachers Comments:

Circle: Explained / Unjustified Justified

Signature _____ Date _____