



## LEAVE OF ABSENCE FROM SCHOOL

**To be completed by Parent/Carer/Guardian**  
(one form to be completed for each child)

Name of Pupil:		National Curriculum Year:
School:		Group/Class/Tutor Group:

**Your request will be considered by the Headteacher. Please note all requests will be judged on an individual basis but any leave of absence can only be approved in exceptional circumstances.**

Dates for requested leave of absence: From ..... To .....

Number of days that have been requested: .....

Please give brief reasons for your request for the leave of absence.

  
  
  
  
  
  
  
  
  
  

Signature(s) ..... Date: .....

Print name(s) .....

**To be completed by School**

Your request for leave of absence *has/has not\** been approved for the following reason(s):  
*\*delete as appropriate*

  
  
  
  
  
  
  
  
  
  

Date received by school: .....

Date refusal letter was sent: .....

Headteacher's Signature:..... Date: .....

The code placed in the register will be:  (please circle relevant code)	<b>C</b>	<b>G</b>	<b>H</b>	<b>O</b>	<b>P</b>	<b>R</b>
Performance (licence required) /Exceptional circumstances	Unauthorised Leave of absence	Authorised Leave of absence	Unauthorised (other reason)	Approved sporting activity	Religious observance	

**For office use**  
Attendance record :