**LEAVE OF ABSENCE REQUEST – DURING TERM TIME**

Dear Mr Smith

**Re: Student’s Name**

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I request permission for the above named student(s) to take leave of absence, as detailed below;

Dates of requested leave

From\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No..of School days\_\_\_\_\_\_\_\_\_

Reason for request;

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I understand:

* Term time holidays will not be authorised, in accordance with The Education (Pupil Registration) (England) (Amendment) Regulations 2013.
* Leave of absence for other reasons can only be approved by the Principal and will only be granted in exceptional circumstances
* If approved – where possible and appropriate, proof will be required
* After four weeks absence, my child may be removed from the school register
* If leave is refused, the absence will be recorded as unauthorised and referred to the Education Welfare Service who will issue a Penalty Notice fine of £60 to each parent and for each child

Signed Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE RETURN COMPLETED FORM TO MRS S CAWLEY**

Request Approved Yes/No

Principal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_