



Request for leave from school

Please complete the form below to request leave from school. In accordance with government guidelines holiday absence will not be authorised unless there are exceptional circumstances (for example, medical appointments which cannot be taken outside of school hours). **Please be aware that supporting evidence of exceptional circumstances is required.** If you feel that there are exceptional circumstances surrounding a request for absence, please make an appointment with the headteacher.

Where absence has been authorised, please ensure that your child returns to school immediately following the absence. If, for any reason, your child is unable to return immediately, please contact the school as your child's school place may be at risk.

To be completed by the parent:

Child's name: _____ Class: _____

Proposed date(s) of absence:

Date of first day of leave: Date back in school: Number of days absence:

Reason for request for absence during term time:			
Signed (parent):		Date:	
Print Name:		Relationship to Child:	

*** Please note unauthorised absences may result in the Local Authority issuing an FPN.**

To be completed by school staff

Request authorised: *Request not authorised: Non-Stat Code

Comment:

Signed Headteacher:



Values-based Education
IVET Quality Mark



University of Bedfordshire

