

Coachmaker Way, Hethersett, Norwich NR9 3GN
Tel: Norwich 01603 810674

Email: office@hethersettwoodside.norfolk.sch.uk

Headteacher: Mrs Mainwaring

#### **Leave of Absence Request Form**

# APPLICATION FOR PUPIL LEAVE OF ABSENCE FROM SCHOOL DURING TERM TIME

## Important Information for Parents – please read before completing this form

We expect every pupil's attendance at school to be 100% unless there are exceptional or unavoidable reasons for absence. Parents do not have any legal entitlement to take their child on holiday during term time. It is the Headteacher who decides whether a period of leave during term time will be authorised or not in line with legislation. The Education (Pupil Registration) (England) Regulations 2006 (amended in September 2013) make it clear that Headteachers cannot grant any leave of absence during term time unless 'exceptional circumstances' exist.

Every request for leave of absence during term time will reviewed on an individual basis with due consideration of the circumstances but the Headteacher can only grant leave of absence if they consider exceptional circumstances apply. If the exceptional circumstances are agreed, the Headteacher will determine the length of the absence to be authorised.

All requests for leave of absence should be made in advance and before any arrangements are confirmed or money committed. This form must be completed in full by the parent who intends to remove the pupil from school during term time. Failure to make a request for a leave of absence in advance will result in the absence taken being recorded as unauthorised.

# I have read the above information and wish to apply for Leave of Absence from school for:

Child's Full Name:	Date of Birth:	Class:



Coachmaker Way, Hethersett, Norwich NR9 3GN Tel: Norwich 01603 810674

Email: office@hethersettwoodside.norfolk.sch.uk

Headteacher: Mrs Mainwaring

Parent/Carer Details (please list all parents)				
First Name:		Surname:		
Date of Birth:		Relationship t the child:	0	
Address and				
postcode:				
Telephone number:				
First Name:		Surname:		
Date of Birth:		Relationship t the child:	0	
Address and postcode:				
Telephone number:				
Siblings: Please provide the name of any siblings and the school that they attend				
Child's Full Name:		Date of Birth:	School:	



Coachmaker Way, Hethersett, Norwich NR9 3GN Tel: Norwich 01603 810674

Email: office@hethersettwoodside.norfolk.sch.uk

Headteacher: Mrs Mainwaring

Details of the absence						
Date of Fi of absence				te of last day absence:		
Total Num				pected date ourn to school		
Please pro	ovide the	reason fo	or this request	including su	oporting evid	dence:
Please rea	ad the fol	lowing st	atement and si	gn to indicate	you unders	stand the
this:						
I would like to request the above absence. I understand that the school strongly advises against taking unnecessary absence during term time and accept that this may have a detrimental impact on my child/ren's progress. I understand that a penalty notice may be issued if this request is denied and my child is absent during this period. I understand that a fine will be payable per child, per parent of £120 if paid within 28 days but reduced to £60 per child, per parent if paid within 21 days.						
Signed:			Full name:		Date:	
Signed:			Full name:		Date:	



Coachmaker Way, Hethersett, Norwich NR9 3GN Tel: Norwich 01603 810674

Email: office@hethersettwoodside.norfolk.sch.uk

Headteacher: Mrs Mainwaring

To be completed by the school:				
Date request 1		Total number		
received by the		of days	days	
school:		requested:		
Child's Name:	Current %			
	Attendance	e Declined?		
Reason for school's decision:				
Headteacher:				
Signed:		Date:		