



Leave of Absence Request Form

This form should be completed and submitted to the Principal at least four weeks before the start of the proposed leave of absence. Separate forms should be completed for each child if more than one.

Parents/carers are reminded that Leave of Absence taken without permission may result in the issuing of **fixed penalty fines** by the Local Authority of up to £120 per parent/carer per child.

Parents/carers are also reminded that Leave of Absence for the purpose of holidays in term time can **no longer be authorised** except in the most exceptional circumstances.

Name of child:	
Tutor group:	
Are there siblings in a local school(s)?	YES / NO
Please state school(s) sibling(s) attend:	
Name(s) of sibling(s):	
Name of parent/carer making request:	
Address of parent/carer making request:	
Telephone number(s) of parent/carer making request:	
Start date of proposed leave of absence:	
End date of proposed leave of absence:	

Please turn over to continue



Reasons for request:

Signed _____ Date _____
Parent / Carer

Please return this completed form to the school office.

ACADEMY USE:

APPLICATION FOR ABSENCE FROM ST. EDWARDS CHURCH OF ENGLAND ACADEMY

Name of child

Tutor group

Your recent request has been AUTHORISED/NOT AUTHORISED for these dates

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Reason for request being authorised/not authorised

Signed

Date

Principal's Signature

Date

