A blue and white sign with green border

Description automatically generated

**Leave of Absence Request Form**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s Name: |  | | | | Date of  Birth: | |  | |
| Class: |  | | | | Year: | |  | |
| Main Parent(s) / Carer(s) | | | | |  | |  | |
| Surname: |  | | Surname: | |  |  |  | |
| First Name: |  | | First Name: | |  |  |  | |
| Date of Birth: (for legal purposes in the event of prosecution) | | | | |  | |  | |
| Date of Birth: |  | | Date of Birth: | |  |  |  | |
| Address and Postcode: |  | | | |  | |  | |
| First Written Language if not English: |  | |  | |  | |  | |
| Telephone Contact No’s: |  | | | |  | |  | |
| Siblings / Siblings School (if different) |  | |  | |  | |  | |
| Siblings / Siblings School (if different): |  | |  | |  | |  | |
| Additional Parent / Carer (Please complete if parents live separately) | | | | |  | |  | |
| Surname: |  | First Name: | |  |  | | Date of Birth: |  |
| Address and Postcode: |  | | | |  | |  | |
| Telephone contact Nos: |  | | | |  | |  | |

|  |  |
| --- | --- |
| Start date of absence: |  |
| Last date of absence: |  |
| Exceptional circumstance resulting in this request for absence, WITH EVIDENCE ATTACHED:  Types of evidence can include, booking details, flight documents, invitations, certificates, appointment letters: |  |

I / We understand that a penalty notice may be issued if this request is refused, and my / our child(ren) is / are absent during this period. I / we 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. (All parents/carers to sign where appropriate)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signed: |  | Full Name: |  | Date: |  |
| Signed: |  | Full Name: |  | Date: |  |

To be completed by the school:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date Received by School: | |  | | | |
| Total number of days requested: | |  | | | |
| Leave of Absence AGREED/DECLINED for the following reason/s: | | | | | |
|  | |  | | | |
| Date of decision letter sent to each parent/carer: | |  |  | | |
| Headteacher: |  |  | | | |
| Signed: |  |  | | Date: |  |