

ARCHBISHOP TEMPLE SCHOOL

APPLICATION FOR LEAVE OF ABSENCE



Name of Child

Form

I WISH TO APPLY FOR LEAVE OF ABSENCE FROM SCHOOL

From

To

REASON FOR ABSENCE

.....
.....
.....
.....
.....
.....

Signature (Parent/Carer) Date

Address
.....
.....

Tel

For School Use Only

Headteacher notes:
.....
.....

Signed: