

HANSLOPE SCHOOL

HOLIDAY/LEAVE OF ABSENCE FORM

Please return the form as soon as possible before proposed absence.

PARENT TO COMPLETE

I request permission for

Child's name: _____ Class: _____

to be absent from school for the period: _____ to _____ (inclusive).

Reason for absence: _____

I understand that this will affect the continuity of the National Curriculum course of study that my child is following.

Requests for Holidays

I have read and understood the information about Fixed Penalty Notices in the school's Attendance Policy and understand that if I take my child on holiday without consent from the school I may be fined

Parent/Guardian Name: _____ Signed: _____

Date: _____

HEADTEACHER TO COMPLETE

I acknowledge receipt of the Holiday/Leave of Absence request.

Due to the nature of the request, your child's absence for the above period will be recorded as authorised / unauthorised.

This will make a total of _____ school days of requested absence during this academic year broken down as follows:

_____ Authorised days / _____ Unauthorised days

Mrs Lawrence
Interim Headteacher

**Please complete this form at least 2 weeks before requested absence*