



St Bartholomew's C of E Primary School

Headteacher : Mrs P Gavin
Deputy Head : Mrs J Wainwright

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REQUEST FOR AUTHORISED ABSENCE FROM SCHOOL (HOLIDAY REQUEST FORM)

I / We request permission for my / our child / children:

..... Class
..... Class
..... Class
..... Class

To be absent from school for our family holiday from:

..... TO Inclusive

I / We understand that legally no child is entitled to be absent for holiday purposes for more than two weeks in anyone year.

SIGNED Date

Please call at the school office to collect your authorised form.

ST BARTHOLOMEWS C OF E PRIMARY SCHOOL

To Parent/s of

I agree to the above request for family holiday leave of absence.

Mrs P Gavin Date.....
Headteacher



Stephen Lawrence
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