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**Request For Special Leave of Absence**

I, being the parent / carer of ­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

request that you consider allowing my child/ren to be absent from school for the following reason:

|  |
| --- |
| \*Details of the rare and exceptional circumstances:Date from\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Signature parent / carer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

FOR SCHOOL USE:

Leave of absence has been **authorised** for …………….days / has **not been authorised** for ……………days.

Reason why absence is unauthorised:

……………………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………

For this academic year your child’s total attendance figure is currently …………………….%

Signed …………………………………………………………Head Teacher Date ……………………………………

**Please note: All unauthorised term-time leave may be issued a penalty fine.**