

APPLICATION BY PARENT/CARER FOR CHILD'S LEAVE OF ABSENCE FROM SCHOOL DURING TERM TIME

If you consider you have to take a holiday in term time, and that you have exceptional circumstances, please complete this form and return to the school at least 4 weeks before the date you wish to remove your child from school.

Pupil Name	Tutor Group/Class
Home Address	
First day of absence	Date of return to school
Total number of days mis	sed
Reason for absence	
taken and a Fixed Penals could be issued to each p a fine of £60 which increa	orised holiday the Local Authority will be notified of the holiday ty Notice could be considered. Please note that such a Penalty parent for each child taken out of school. A Fixed Penalty Notice is ases to £120 if not paid within the first 28 days. Thereafter, if the this will result in legal action being instigated in the Magistrates of the 1996 Education Act.
Name of Parent/Carer make	king application
Signed	Dated
	ng at least 4 weeks notice of the proposed absence)
	Tutor Group
> AUTHORISED:	Your request has been authorised due to exceptional circumstances:/ to/
> UNAUTHORISED:	Your request for leave of absence during term time has not been authorised because :
Signed	Headteacher Date/