



Leave of Absence Request Form

Child's Name:		Date of Birth:	
Class:		Year:	
Main Parent(s) / Carer(s)			
Surname:		Surname:	
First Name:		First Name:	
Date of Birth: (for legal purposes in the event of prosecution)			
Date of Birth:		Date of Birth:	
Address and Postcode:			
First Written Language if not English:			
Telephone Contact No's:			
Siblings / Siblings School (if different)			
Siblings / Siblings School (if different):			
Additional Parent / Carer (Please complete if parents live separately)			
Surname:		First Name:	
		Date of Birth:	
Address and Postcode:			
Telephone contact Nos:			

Start date of absence:			
Last date of absence:			
Please explain need for exceptional circumstance resulting in this request for absence, WITH EVIDENCE ATTACHED: Types of evidence can include, booking details, flight documents, invitations, certificates, appointment letters:			

I / We understand that a penalty notice may be issued if this request is refused, and my / our child(ren) is / are absent during this period. I / we understand that a fine will be payable **per child, per parent of £120 if paid within 28 days but reduced to £60 per child, per parent if paid within 21 days. (All parents/carers to sign where appropriate)**

Signed:		Full Name:		Date:	
Signed:		Full Name:		Date:	



To be completed by the school:

Date Received by School:	
Total number of days requested:	
Current attendance mark	
Authorised % and unauthorised %	
Leave of absence AGREED / DECLINED for the following reason/s:	
Date of decision letter sent to each parent/carer:	
Headteacher:	Ben Arnell
Signed:	Date:



St Andrew's C. E. Primary School
5 Grafton Street, Kettering, Northants NN16 9DF

"Love your neighbour as yourself"

**LEARNING AND
FLOURISHING
TOGETHER**

