TAVISTOCK INFANT SCHOOL APPLICATION FOR PUPIL LEAVE OF ABSENCE FROM SCHOOL DURING TERM TIME

Important Information for Parents – please read before completing this form

We expect every pupil's attendance at school to be 100% unless there are exceptional or unavoidable reasons for absence. Parents do not have any legal entitlement to take their child on holiday or other absence for the purpose of leisure and recreation during term time. It is the Headteacher who decides whether a period of leave during term time will be authorised or not in line with legislation.

The Education (Pupil Registration) (England) Regulations 2006 (amended in September 2013) make it clear that Headteachers cannot grant any leave of absence during term time unless 'exceptional circumstances' exist.

Every request for leave of absence during term time will be reviewed on an individual basis with due consideration of the circumstances but the Headteacher can only grant leave of absence if they consider exceptional circumstances apply. If the exceptional circumstances are agreed, the Headteacher will determine the length of the absence to be authorised.

All requests for leave of absence should be made in advance and before any arrangements are confirmed or money committed. This form must be completed in full by the parent who intends to remove the pupil from school during term time.

Failure to make a request for a leave of absence in advance will result in the absence taken being recorded as unauthorised.

I have read the above inf	formation and wis	h to ap	ply for Leave of Abs	ence from school for:	
Child's Full Name:		Date of Birth:		Class:	
Parent Details (please lis	t all parents)				
First Name:			Surname:		
Date of Birth:			Relationship to the	•	
			child:		
Address and postcode:					
Telephone number:					
First Name:			Surname:		
Date of Birth:			Relationship to the	•	
			child:		
Address and postcode:					
Telephone number:					
Siblings: Please provide	the name of any s	iblings	and the school that	they attend	
Child's Full Name:		Date of Birth:		School:	
		1			

Details of the absence								
Date of First absence:	day of				e of last day of ence:			
Total Number absent:	er of days			-	ected date of Irn to school:			
Please provide the reason for this request including supporting evidence:								
Please read the following statement and sign to indicate you understand the this: I would like to request the above absence. I understand that the school strongly advises against taking unnecessary absence during term time and accept that this may have a detrimental impact on my child/ren's progress. I understand that a penalty notice may be issued if this request is denied and								
my child is absent during this period. I understand that a fine will be payable per child, per parent of £160 if paid within 28 days but reduced to £80 per child, per parent if paid within 21 days.								
Signed:			Full name:		Dat		te:	
Signed:			Full name:			Da	te:	
- . 1								
To be compl Date reques				Tota	al number of day	/S		
the school: Child's Name			Current %	requested:		ised or Dec	lined?	
			Attendance					
Reason for s	chool's decis	sion:						
Headteache	r:							
Signed:					Date:			