



LEAVE OF ABSENCE REQUEST FORM

Important information for parents – please read before completing this form

Working together to improve school attendance (2024), advises all schools that they should only grant a leave of absence during term time in exceptional circumstances, considering each request on a case-by-case basis. If a leave of absence is granted, it is for the Headteacher to determine the length of time the pupil can be away from school. Although we recognise the value and benefits of family holidays, it is unlikely a leave of absence for the purpose of leisure and recreation to be an ‘exceptional circumstance’.

Requests for leave must be made in advance, otherwise we will be unable to consider your individual circumstances and the absence will be recorded as unauthorised. Headteachers are not obligated to reconsider authorising leave if an application was not made in advance.

Our aim is for all pupils to have 100% attendance unless there are exceptional or unavoidable reasons for absence. If you require any support with your child's attendance, please contact your school.

If you intend to request a leave of absence during term time, you are required to complete the form below and return this to school **a minimum of 4 weeks before the required date**. One form must be completed for each child for whom you are requesting the absence.

I have read the above information and wish to apply for leave of absence for:			
Pupil's name		Date of Birth	
Class			
Year			
Parent(s) / Carer(s)			
Surname		Surname	
First Name		First Name	
Date of Birth		Date of Birth	
Address and postcode			
First written language			
Telephone number			
Sibling name		Sibling name	
Sibling School		Sibling School	
Start date of absence			
Date of return to school			
Date of flight / travel (proof required)			
	Please state the exceptional circumstances of your request:		
•	<ul style="list-style-type: none"> • Please provide evidence to support your request, this should include a copy of the flight / accommodation booking with evidence of date of initial booking • If the exceptional circumstance is for medical reasons, it is essential that current medical evidence is provided • Please provide any other relevant information (including relevant dates) and reasons why the student should be absent for the length of time requested. 		
	Please read the following statement and sign to indicate you understand this:		
	I would like to request the above absence. I understand that the Trust strongly advises against taking unnecessary absence during term time and accept that this may have detrimental impact on my		

		<p>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 parent per child.</p> <p>I have read and understood Peterborough City Council's information regarding penalty notices for absence from school and the action they may take.</p> <p>I / We understand that a penalty notice may be issued if this request is denied and my / our child is absent during this period. I / We understand that a fine may be payable per child, per parent of £160.00</p>		
Signature			Signature	
Full Name			Full Name	
Date			Date	

FOR OFFICE USE	
Approved <input type="checkbox"/>	Not Approved <input type="checkbox"/>
Number of days approved	
Reason for leave of absence being granted / refused	
Signature	
Name	Emma Anderson
Position	Headteacher
Date	