



LITTLE HEATH SCHOOL

Request for planned Leave of Absence during Term Time

To be completed at least three weeks before the proposed leave of absence. The Head Teacher will not grant **any** leave of absence during term time unless there are **exceptional circumstances**.

Parent/Carer(s) to complete ALL BOXES in first section:

Name of Student:		Form:
Purpose of absence:		
Reason for absence during term time (please include as much detail as possible, together with country/place in which the event is taking place)		
Proposed start of absence:	Date of return to school:	
Are there any siblings at another school, if so please provide details:		
Signed: _____ (Parent/Carer) Date: _____		
<i>By signing this form you are acknowledging the impact on learning if the child is absent from school.</i>		

School to complete: -

Number of days absence requested:	
Percentage of attendance:	
Has absence during term time been requested previously and if so when:	
Leave of Absence is:	APPROVED / NOT APPROVED
Reason:	
Signed _____ Deputy Head/Headteacher	
Date: _____	
Date school received form:	
Date Parent/Carer informed of decision:	