



APPENDIX 1: Leave of Absence Request Form

This form should be completed and submitted to your child's Class Teacher/Form Tutor as far in advance (at least 3 days) of the start of any proposed absence as possible. In the case of medical/dental appointments, please also attach a copy of the appointment confirmation.

Parents/guardians are reminded that, as stated in the school's Attendance Policy, our expected level of attendance is 95%. The school reserves the right to terminate the place of a student who significantly fails to meet this expectation.

Absence can damage successful learning, so appointments and holidays should, wherever possible, be arranged outside of the school day or term-time. Leave of Absence for the purpose of holidays in term-time may not be authorised except in the most exceptional circumstances.

Student's name:	Class:
Parent's name:	
Address:	
Telephone:	-
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Start date of proposed leave of absence:	
End date of proposed leave of absence:	
Reasons for request:	
Appointment confirmation attached: YES / NO (delete as appropriate)	