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| **Name of Pupil:** **Siblings in this or other schools:** **(name, dob, name of school)****Current address:** | **Name of Parents/Carers 1: (please ensure school have correct details for all parents/carers)****Parent/Carer 1 D.O.B:****Name of Parent/carer 2:****Parent/carer 2 D.O.B** |
| **Dates of leave: From To**  |
| **Notifications for leave during term time should be authorised by the headteacher if the reason is considered to be an exceptional circumstance.****Reason for leave:****Do you consider there to be exceptional circumstances (please indicate)?** **(please attach additional information/evidence to support your circumstances)** **Where will you be staying during the leave period? Please provide the full address and Emergency Contact Details (UK and Abroad)****UK:** **Abroad:**  |
| * I confirm that the information on this form is true
* I agree to keep the school informed of any changes to my travel arrangements or if my child is unable to return to school on to due date
* I am aware that if my child does not return to school by the date provided that he/she is at risk of losing their place at this school
* **I am aware that I may be fined and/or prosecuted for any time which my child is absent from school that has not been authorised by the headteacher.**
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| **Signed by parent/carer:** | **Print name & relationship to child:** | **Date:** |
| **For school use only** | **Date request received / /**  |
| **Has the notification been considered by the headteacher? Y/N****Has the notification been discussed with the parent/carer? Y/N Date: …………….****No of days Authorised ……… No of days Unauthorised ………….****Date of decision letter sent to parent/carer (only if leave is to be granted):** |
| **Name of school:** | **Headteacher’s signature:** | **Date:** |