| SCHOOL SCHOOL | EXCEPTIONAL CIRCUMSTANCES - LEAVE IN TERM TIME REQUEST | | |
|---|--|-------------------|------|
| | Pupil's Name | D.O.B | Form |
| | Pupil's Name | D.O.B | Form |
| I request permission for the above named pupil(s) to be granted leave during the school term. | | | |
| Reason for request | | | |
| | | | |
| | | | |
| | | | |
| Dates of Absence | | | |
| From | То | No of school days | |
| if travelling abroad, I / we will supply a copy of the return travel documentation. I / we will supply the name and phone number of a contact person whilst abroad. if I / we do not return at the agreed time; I / we am / are aware that I / we may be issued with a penalty notice, and could be fined £60 or £120 depending on how soon payment is made. If I do not pay the fine, I / we could then be required to attend Court; this could result in a fine of up to £1000 per child and having a criminal record. after four weeks of absence my / our child/ren may be removed from the school register and I / we will then be responsible for finding a new school on my / our return. | | | |
| Parent/Carer Name | | Parent/Carer Name | |
| | | | |
| DOB | | DOB | |
| Address | | Address | |
| | | | |
| Signature | | Signature | |
| Date | | Date | |
| | | | |

Request agreed / denied

Signed Head Teacher

Dated