Request for leave during term time



To: The Head of Fountains Primary School Date:

I request consideration of a grant of leave of absence from school term during term time for						
Child's Full Name:			Date of Birth:			
For the period fro	m		to (date):			
(date): The exceptional c	est are:					
The exceptional circumstances and reason for this request are:						
I have (an)other child(ren) in (an)other school(s) as follows						
Child(ren) full name(s)			School(s) attended			
Clind(left) full harrie(s)						
Signature of 1 st parents/carer(s)				Print Na	me	
Signature of 1 st parents/carer(s)					Print Name	
Please return completed form to the school office. The school will write to you and inform you of the						
decision on whether the request is authorised or not.						
For Office Use Only						
Current %		Last Year's			%	
Attendance			Attendance			
Number of school sessions taken as leave during term time (this academic year)						
,						
Agreed/Not Agreed						
Request for leave is agreed/is not agreed for the student to take leave during term time between the above dates.						
Rationale to declin						
Signed: (Assistant	Head - Attendanc	ce)			Date:	
Notification of decision: Date letter sent to parent/carer						