

St Gregory's RC Primary School

Leave of Absence Form

PARENTAL REQUEST FOR PUPIL HOLIDAY ABSENCE FROM SCHOOL DURING TERM TIME

You should be aware that any absence from school, for whatever reason, will potentially have a detrimental effect on your child's learning and progress.

Authorization will only be granted in **exceptional** circumstances.

Should you wish to apply for your child's absence from school you are requested to complete the section below and return the form to school **at least 1 month prior to the planned absence.**

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N.B. Requests received within a month of the planned absence are likely to be refused.

Child's Name:	Class:
Absence Requested:	
From:	To:
(Please insert first and last days on which your child will be absent from school.)	
Reason for this request:	

I request permission for my child to be absent from school on the above dates. I understand that this absence will disrupt my child's learning. I will ensure that my child returns to school immediately after the agreed last date of absence and that all work missed will be completed.

Signed (Parent/Guardian): _____

Date: _____

For School Use Only:

Date Received:			
Attendance percentage to date over the last 3 years:	Year 1	Year 2	Year 3
Previous Requests:	Year 1	Year 2	Year 3
(Please delete as appropriate)	Yes/No	Yes/No	Yes/No
Request approved / denied:			
Date parent(s) informed of decision:			
Signed:			
Date:			