



St. Nicholas' Primary School

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HEADTEACHER: Julie Holland



APPLICATION LEAVE OF ABSENCE FORM

If you need to take your child out of school for *exceptional circumstances*, please make an appointment with the Headteacher at least one month in advance to discuss and fill out the form together. Please note that absences for holidays will not be authorised.

The Headteacher will determine the number of school days a child can be away from school **if** the leave is granted. Parents/carers who remove their children from school without authorisation or do not return their child to school on the agreed date following an authorised period of leave of absence, may face the school informing the Local Authority Attendance Officer if unauthorised holidays are taken.

Date of completion of form: _____

Pupils Name:	_____	Class	_____
Pupils Name:	_____	Class	_____
Pupils Name:	_____	Class	_____
Pupils Name:	_____	Class	_____

I am applying for authorised leave of absence for period _____ to _____

Number of days requested absent _____

Reason of absence: _____

Parent/Carer's signature: _____

During the child's absence from school, some aspects of the National Curriculum will be covered. Please discuss this with the class teacher so that work can be covered at another time. We encourage children to keep a diary or record of their holiday to reinforce and consolidate aspects of the curriculum and to share with staff and children on their return to school

APPLICATION FOR LEAVE OF ABSENCE FROM SCHOOL DUE TO EXCEPTIONAL CIRCUMSTANCES

Thank you for completing the Request for Absence Form for your child/ren.

Date Form Received: _____

Current Attendance %

Pupils Name:	_____	Class	_____	_____
Pupils Name:	_____	Class	_____	_____
Pupils Name:	_____	Class	_____	_____
Pupils Name:	_____	Class	_____	_____

Date of Absence: From _____ To _____

I give/do not give permission for your child to be absent on this occasion. The dates and information have been recorded on your child's attendance records.

Signed _____ Headteacher

Date _____