



The Bishops' Primary School



Application for Leave of Absence from School during term time

PLEASE ONLY USE THIS FORM FOR THE ITEMS LISTED IN THE BOXES BELOW. FOR ALL OTHER TYPES OF ABSENCE PLEASE EMAIL absence@bishops.essex.sch.uk

Leave of absence may only be granted by a person authorised in that behalf by the Head Teacher. Taking your child out of school during term time could be detrimental to their educational progress. **THERE IS NO ENTITLEMENT** to parents / carers to take a child out of school during term time, however you may apply to the school for leave of absence in exceptional circumstances.

Applications for absence may only normally be authorised for the following reasons:

Is for:

- ✓ To attend exceptional family occasions such as weddings, funerals, graduations of close family members.

Not for:

- X Birthday treats
- X Holidays (including surprise holidays)
- X Shopping trips

Agreement to each request is at the discretion of the Head Teacher, acting on behalf of the Governing Body (Pupil Registration Regulations 2006). If the absence is not authorised and the leave is taken, the matter may be referred to the Local Authority who may issue a Penalty Notice for £120 (or £60 if paid within 21 days) to each parent / carer for each child taken out of school. Failure to submit a leave of absence request may result in the absence being unauthorised and a referral to the Local Authority who may again issue a Penalty Notice as above.

Dear Head Teacher,

I would like to request permission for leave of absence for my child for the reasons detailed below (further information can be attached if required).

Child's Full Name		Class	
Child's Full Address and Postcode			

First date of absence		Last date of absence	
Date of return to school		Number of school days absent	

If returning in time for lunch is a school dinner required (please tick)			YES		NO	
If returning please choose the meal choice	Main	Vegetarian	Packed lunch			
Reason for request (please give full details, further details can be attached to this form).						

Name of person making request		Relationship to child				
Full Address and postcode (if different from child's above)						
If child above does not reside with you, does the resident parent agree with this application?			YES		NO	
Signature of Parent / Carer with whom child resides		Date				

If you have a child or children at another school, please detail their names and which school(s) they attend below:			
Child's full name:		School:	
Child's full name:		School:	



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For School Office Use only

Dear	Parents / Carers Title, Forename and Surname	
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Child's Forename and Surname		Child's Class	
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First date of absence		Last date of absence	
Date of return to school		Number of school days absent	

Your application for leave of absence as detailed above has been:

Authorised (no. of days absent authorised)		Unauthorised (no. of days absent unauthorised)	
This is for the reason stated below			
Head Teacher Signature		Date	

✂.....

Date application received			
Percentage Attendance Year to date			
Number of Sessions absence this academic year	Authorised	Unauthorised	Total
Have the family of this child been issued with a Penalty Notice in the previous 12 calendar months, if yes please state how many.	YES	NO	Total in previous 12 months

Authorised (no. of days absent authorised)		Unauthorised (no. of days absent unauthorised)	
This is for the reason stated below			
Head Teacher Signature		Date	