Request for leave during term time



To: The Head of Fountains Primary/High 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 from (date):				to (date):				
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				
Signature of 1 st parent/carer(s)				Print Name				
Signature of 2 nd parent/carer(s)				Print Name		ne		
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 Attendance	%		Last Year's Attendance	%		SIMS Code		
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 above student to take leave during term time between the above dates.								
Rationale to decli	ne request:							
Signed: (Head teacher)				Date:				
Notification of decision: Date letter sent to parent/carer								