



## Application for Pupil Leave of Absence from School for Exceptional Circumstances

Term time leave can only be granted at the discretion of the Headteacher for **EXCEPTIONAL AND DOCUMENTED CIRCUMSTANCES**

### Pupil Details

Pupil Name	Pupil Class or Form Group	Pupil address

### Absence Details

First day of absence from school		
Date of return to school		
Total number of days absence		
Address/es where pupil/s will be staying during absence		
Name and contact details of person responsible for pupil's care during absence		
Reason for applying for exceptional leave:		
Evidence supporting reason for absence provided	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Travel documents provided	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Weekly contact during the absence is required for any leave to be considered. This is a standard safeguarding requirement. The staff member assigned to make contact must be able to see or speak to both the child/ren and the adult responsible for their care. Do you agree to this?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Date and time preferred for contact		

### Parent and Contact Details

	Parent/Carer	Parent/Carer	Emergency contact in UK (required)
Name			
Address			
Relationship to pupil			

### Leave also requested for siblings in other schools

Name of sibling	School of sibling	Class/Form of sibling

PLEASE NOTE THAT ABSENCE TAKEN WHICH HAS NOT BEEN AUTHORISED COULD BE LIABLE FOR A **FIXED PENALTY FINE BY THE LOCAL AUTHORITY** AND EXTENDED ABSENCES WITHOUT PERMISSION MAY PUT YOUR CHILD'S PLACE AT THIS SCHOOL AT RISK.

Parent/Carer Signature	Date submitted to school



School Use Only											
Current percentage attendance											
Have return travel tickets been booked and seen by school?	Yes <input type="checkbox"/> No <input type="checkbox"/>										
Number of days of exceptional leave taken in this or previous academic year											
Number of days of unauthorised absence in this or previous academic year											
Does leave coincide with any significant academic or exam period?	Yes <input type="checkbox"/> No <input type="checkbox"/>										
Mitigating circumstances (including any ongoing issues)											
Aggravating circumstances (including any ongoing issues)											
Is absence authorised?	Yes <input type="checkbox"/> No <input type="checkbox"/>										
If authorised, what period of absence has been authorised (dates)?	/ / to / /										
If authorised, what contact schedule has been requested?  Parent must agree to a minimum of weekly contact for leave to be considered. This is a standard safeguarding requirement. The staff member assigned to make contact must be able to see or speak to both the child/ren and the adult responsible for their care	Parent agrees to weekly contact on the following day each week:										
	<table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">Monday</td> <td style="width: 30%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Tuesday</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Wednesday</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Thursday</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Friday</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Monday	<input type="checkbox"/>	Tuesday	<input type="checkbox"/>	Wednesday	<input type="checkbox"/>	Thursday	<input type="checkbox"/>	Friday	<input type="checkbox"/>
	Monday	<input type="checkbox"/>									
	Tuesday	<input type="checkbox"/>									
	Wednesday	<input type="checkbox"/>									
	Thursday	<input type="checkbox"/>									
Friday	<input type="checkbox"/>										
Contact will be made at:	__: __ am/pm										
Register code to be used for this absence	G – unauthorised holiday <input type="checkbox"/>										
	H – authorised holiday <input type="checkbox"/>										
	C – authorised absence <input type="checkbox"/>										
	O – unauthorised absence <input type="checkbox"/>										
	M – medical <input type="checkbox"/>										
	R – religious <input type="checkbox"/>										
Signature of Headteacher											
Date											



Pupil Details			
Pupil Name	Pupil Class or Form Group Pupil address		
Absence Details			
First day of absence	Date of return to school		
Is absence authorised?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If authorised, what period of absence has been authorised (dates)?			
Start date of authorised absence	Date pupil is required to return to school		
Required Contact Schedule			
<p>If authorised, what contact schedule has been agreed?</p> <p>Parent must agree to a minimum of weekly contact for leave to be considered. This is a standard safeguarding requirement. The designated staff member making contact must be able to see or speak to both the child/ren and the adult responsible for their care</p>		Weekly contact will be made on the following day each week:	
		Monday	<input type="checkbox"/>
		Tuesday	<input type="checkbox"/>
		Wednesday	<input type="checkbox"/>
		Thursday	<input type="checkbox"/>
		Friday	<input type="checkbox"/>
		Contact will be made at:	__:__ am/pm
Signature of Headteacher			
Date			
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