

BLANFORD MERE NURSERY & PRIMARY SCHOOL

LEAVE OF ABSENCE FORM - RECEPTION TO YEAR 6



Child(ren) Names: Class:
.....
.....

Address:
.....

I would like to apply for 'Leave of Absence' from school for the above named:

From: (date) To: (date)

The Head teacher may only grant 'Leave of Absence' in special or exceptional circumstances.

Please give the reason leave is required:

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.....

By signing this form, I understand the following:

- The school's Attendance Policy states that absences during term time will not be authorised unless the Head teacher agrees that there are special or exceptional circumstances (a holiday is not considered to be exceptional circumstances) and that any absence will be recorded as unauthorised on the school register. **Please note that if your child is unwell either before or after the leave of absence, then the school will require a doctor's note if the absence is to be authorised. Without a doctor's note this absence will be unauthorised.**
- Any unauthorised absences that meet the thresholds **WILL** be referred to School Attendance and Education Support Service.
- **I understand that when a referral is made** unauthorised absences may be referred to the School Attendance & Education Support Service who, in line with the National Framework for Penalty Notices, may issue a Penalty Notice and/or prosecute you under S444 of the Education Act 1996. Further information about the National Framework for Penalty notices including details of the penalty notice amounts and escalation process in cases of repeat offences can be found online by searching 'The Education Hub - Fines for parents for taking children out of school: What you need to know'.

Signed: Print Name:

Relationship to child(ren):

Names of each adult who has Parental Responsibility for each child:

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Address if different to child's home:

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