

APPLICATION FOR PUPIL LEAVE OF ABSENCE FROM SCHOOL
Please complete a separate form for each child

Full Name of Child: _____	Class: _____
Dates of Absence: _____ To _____	
Have you any other children in the Biddulph Pyramid of schools for whom you have also requested leave of absence?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	
School: _____ Agreement reached: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Reason for application: Please be as specific as possible regarding your request, particularly if you require us to consider your application due to exceptional circumstances. Please be aware that family holidays during term time are no longer authorised. This form still needs to be completed in order to communicate formally our decision.	
Signature of person with parental responsibility: _____	
Print: _____ Date: _____	

OFFICE USE ONLY	
Request seen by Headteacher Y/N	Current Attendance <input type="checkbox"/>
Authorisation granted Y/N	
Letter to be generated Y/N	
Date: _____	

Please return to school office and a letter will be sent to you either authorising the leave of absence, declining authorisation or requesting further information.
We will carefully consider your application and take into account the nature of the leave of absence request (exceptional circumstances).

