

# Application for Leave of



A. Pupil Details			
Name:		DoB:	
Address:			
Class / Form:			

B. Leave of Absence Request Details			
Start date of requested leave:		End date:	
Return to school date:		No. of days:	
What are the <u>exceptional circumstances</u> for your leave of absence request that you wish the school to consider?			
Name of parent / carer (print):			
Signature:		Date:	
Name of parent / carer (print):			
Signature:		Date:	

C. For School Use			
Current attendance %:			
Previous LOA this academic year:			
Does the LOA request time coincide with SATS / other examination periods:			
Any mitigating / aggravating circumstances (Including any ongoing medical issues):			
Child's current / potential level of attainment?			
Is the LOA approved?:	<b>YES</b>	<b>NO</b>	
If <b>YES</b> - Number of days to be authorised for this LOA application:			
Signature of Head Teacher:		Date:	
*Register Code to be used for this LOA:			