



## **Notification of a pupils leave of absence**

Pupil Name .....Class .....

Date of first day of absence .....am or pm

Date of return to school .....am or pm

Number of school days that your child will be absent from school .....

Please detail the exceptional circumstance for which you are requesting leave of absence

(type or write in here)

***I understand that if the absence request is unauthorised the Local Authority may be notified of the holiday taken and a Penalty Notice may be issued. I understand that a Penalty is issued to each parent for each child taken out of school and that this is a fine of £60 if paid within 14 days and £120 if paid between 15 and 21 days. I also understand that failure to pay a Penalty Notice will result in prosecution, except in limited circumstances.***

Name(s) of Parent/Carer (s) making application.

Dr/Mr/Mrs/ Ms Forename.....

Surname .....

Dr/Mr/Mrs/ Ms Forename.....

Surname .....

Signed ..... Dated .....

(Please ensure you are giving at least 14 days' notice of the proposed absence; retrospective applications cannot be authorised)

For school to complete: ☐ AUTHORISED ☐ UNAUTHORISED