



Application by Parent/Carer for child's leave of absence from school during term time

Pupil's Name

Group

Home Address

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I wish to apply for my child to be absent from school during the following dates:

Date of Last day at school Date of Return to school

Total Number of school days missed

Reason for absence from school:

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I make application for my child name above to have authorised absence from school for the reasons stated.

Name of Parent/Carer making the application

Signature Date