

## **Sebert Wood Community Primary School**

**Application for Leave of Absence during term time** (*Please note all applications MUST be made in advance*).

,				
Child's			Child's Class:	
Name:				
-		sence for my child f	rom:	(Date)
The reason(s)	for this request are:			
		Plo	ease continue on a separc	ate sheet if necessary.
I am/am not (pl	ease delete as applicable) a	attaching further ev	vidence in support of th	nis application.
Should this leav	ve of absence be grant	ed my child would	return to school on:	(Date)
Details of Siblin	ıgs:			
If you have other	er children currently at	tending school plea	se complete their detai	ils below.
Child's Name		Child's Age	Name of Child's School	
I understand th	at:			
<ul> <li>this form</li> <li>I may be</li> <li>I will be or unaut</li> <li>Penalty Attendation</li> <li>I confirmation</li> </ul>	m and on any further e e requested to provide e notified in writing who athorised on my child's Notice referral details ance Policy) m that I am the paren with me.	evidence that I have a further information ether this proposed attendance record. I can be found on the t/carer of the child	n to the school. absence would be reco	orded as authorised ment (Annex C of the
signea:		•••••		
Print Name:		Date:		