



Application for Leave of Absence from School During Term Time
Covered by the Education Act (1996) you are required to ensure your child attends school regularly

Parents considering an application for leave of absence should consider the following:

- Any absence leads to a break in learning. It is difficult to catch up on missed work when everyone else has moved on.
- The learning of others is disrupted whilst missed work has to be re-taught. 97% attendance should be the minimum target for every individual (a two-week holiday would give an individual only 94.7% attendance).
- 90% attendance is equivalent to:
 - missing half a day every week;
 - missing over four weeks of school in the year;
 - missing half a year out of every five years of school.

In accordance with advice from the Local Authority and the Department for Education, the school discourages parents from seeking leave of absence during term time.

The school can, but only in very exceptional circumstances, exercise discretionary power to allow a leave of absence. This will only be considered if supporting evidence (for example a letter from your employer) is supplied **at the time** of application.

In summary:

- No parent can demand leave of absence to be authorised.
- Parents should seek approval for any leave of absence **BEFORE** making any bookings or payment.
- Applications for leave of absence must be made at least one month in advance of the first day of requested absence.
- The school is not obliged to provide work for students taking leave of absence and the student must catch up with missed work upon their return. It is the responsibility of parents to ensure this work is completed.
- The Local Authority can issue fines for absence taken without authorisation.

Each application will be considered using the above principles. Once a decision has been made, there is no formal process of appeal.

APPLICATION FOR LEAVE OF ABSENCE FORM

Full Name of Your Child/Children:

Class:

Year Group:

Address:

Leave Requested from _____ to _____

Total Number of School Days _____

Siblings and their school:

Reason for Application:

(Continue on a separate sheet if necessary or attach a letter)

I / We have read the information in this document

Yes / No

Signature of Parent(s) / Carer(s) _____ Date _____

For office use only:

Your request for Leave of Absence has been considered and has been:

Authorised

Not Authorised

Signature of Headteacher: _____