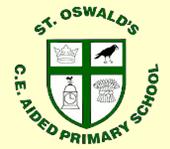
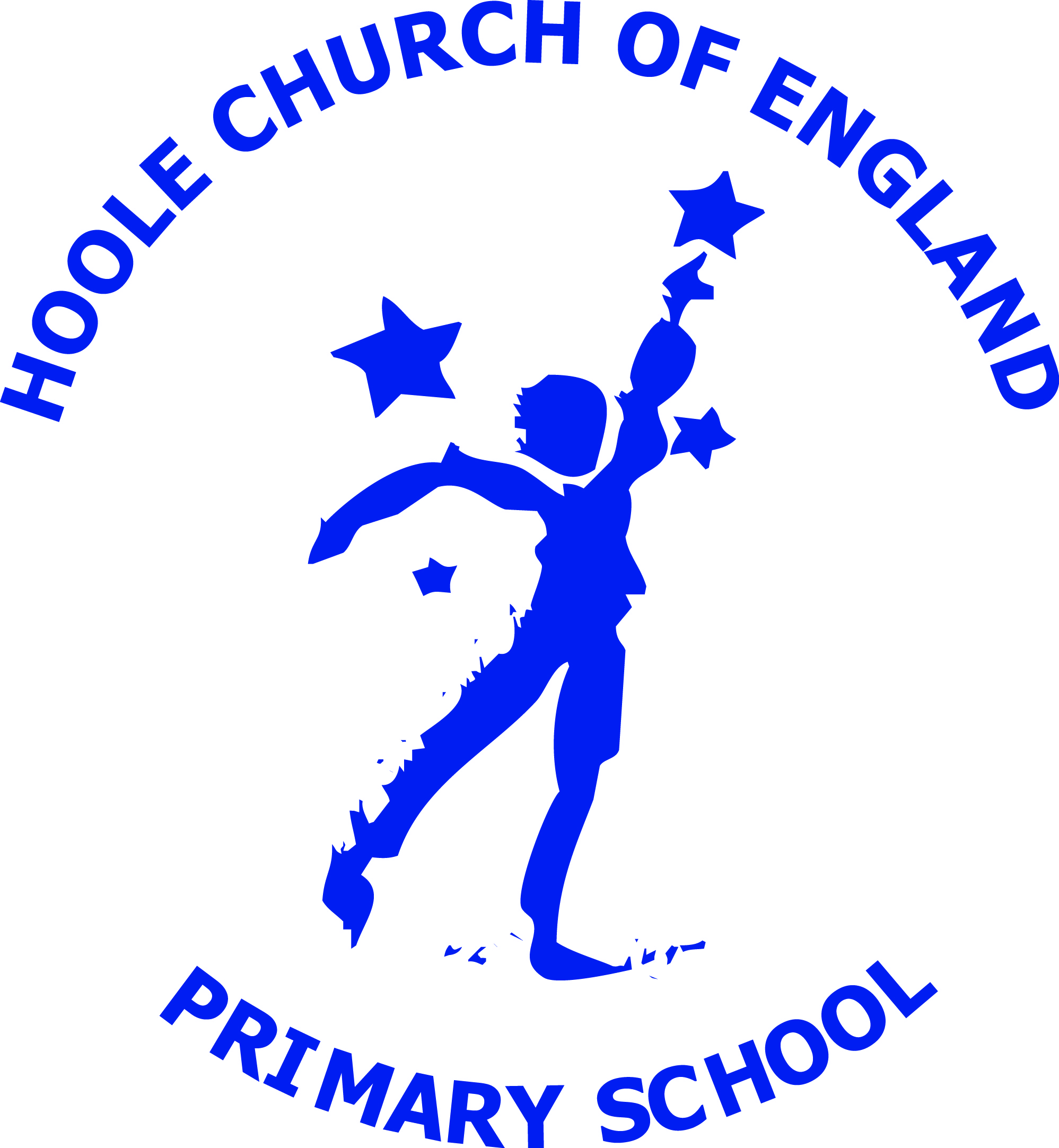
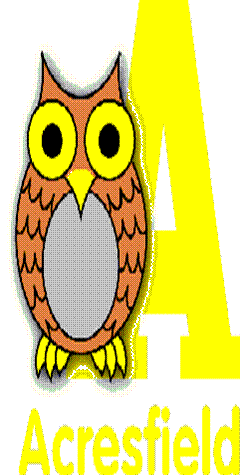
Form for any request of non-medical leave of absence





|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of School** | | | | |
| **Name/s of Child/ren** | |  | **Year Group/s** | |
| **Do you have any other children in other schools? If yes please write name of child/ren and school.** | | | | |
| **State reason for absence** | | | | |
| **First day of absence** |  | | | **Total number of school days missed** |
| **Return date to school** |  | | |
| **Signature** (Parent) **Date** | | | | |
| **Signature** (Parent) **Date** | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **For School Office Use Only** | | | |
| **Acknowledgement of reply for Leave Of Absence** | | | |
| **Headteacher’s Decision** | | | |
| Authorised Absence Unauthorised Absence | | | |
| **Reason for Authorised or Unauthorised Absence** | | | |
| **Signed (Headteacher)** |  | **Date** |  |
| **Copied to Parents** |  | **Register Code** |  |