

APPLICATION FOR LEAVE OF ABSENCE OF CHILD FROM

NORTHBURN PRIMARY SCHOOL

I, the undersigned, being the parent or guardian of:

Name of Child:
Address:
Request that he/she be granted leave of absence from school to enable him/her to (please explain reason for absence)
I understand and accept the following:
 A pupil who has 10 days unauthorised absence will only attain 94.7% attendance. The class teacher will not provide or mark work for/or during this absence. Full responsibility for my child not reaching their personal targets as a result of this absence. My child's friendship group may be affected. The class teacher will not be able to provide work your child may have missed during this absence.
From (1 st day of absence)To (last day of absence)
ClassYear Group
Date
This form is to be completed by the Parent/Carer and forwarded to the Headteacher of the school which the child attends, before the period for which leave of absence is requested.
Reply to Application for Leave of Absence
Name of child
Your application for the leave of absence of your son/daughter from
tois/is not authorised.
Date
Signature of Headteacher
Northburn Primary School