KIND MOTIVATED SUCCESSFUL

## REQUEST FOR TERM TIME ABSENCE

**If you would like to apply for permission for your child to be absent from school, you must complete this form and return it to the school office for authorisation at least 10 days in advance of the proposed leave.**

| **Surname:** | **Forename:** | **Class:** |
|---|---|---|
| | | |

| **Reason For Absence:** |
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| |

| **Start date:** | **End date:** | **No. of School Days:** |
|---|---|---|
| | | |

**Please note:**

1. Parents do not have the right to remove their child from school in term-time. By law, you must ask permission for your child to miss school. The Headteacher will decide whether or not an absence should be authorised. The Headteacher will only authorise absence in term-time when there are exceptional reasons for a child to miss school.
2. Absence in term-time will not be authorised under the following circumstances:
   - During assessment periods
   - When a child's attendance is below 90% or lower than a previously agreed target
   - During the month of September
   - For more than 10 days during term-time in any school year
3. Absence in term-time will only be authorised if parents or carers make a request to the school in advance by completing this form and they can show that there are exceptional reasons why the absence has to be in term-time. The cost, convenience and availability of a particular holiday will not be taken into consideration.
4. Absence for religious observance may be agreed by the Headteacher but will not exceed 2 days in any school year.
5. Parents or carers who repeatedly take their children out of school without permission may be issued with a fixed penalty of up to £100 and face possible prosecution in court. Unauthorised absence counts as truancy.

| | |
|---|---|
| I have read and understand the information above.<br><br>**Signed:**<br><br>Please Print Name: | <br><br>Parent/Carer (Please delete as necessary)<br><br>**Date:** |
| **For Office Use:** | Attendance % |
| Previous Term Time Absence this Academic Year: Y/N | If Yes, number of days: |

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## King's Meadow School

## REQUEST FOR TERM TIME ABSENCE

| **Surname:** | **Forename:** | **Class:** |
|---|---|---|
| | | |

Having considered your application very carefully, the request for the following term time absence

Start Date: End Date:

□ Has been agreed and authorised □ Has not been agreed and will be noted as UNAUTHORISED.

Signed: Date:

**HEADTEACHER**