Request for leave of absence: to be completed in conjunction with the Attendance Management Policy



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| **Name of School St Bede’s Catholic Primary 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/carer) | Date |
| **Signature** (parent/carer) | Date |

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| **For School Office Use Only** |
| **Current Attendance** | **%** |
| **Previous Years Attendance** | **%** |
| **Headteacher’s Decision:** |
| **Authorised Absence Unauthorised Absence** |
| **Reason for Authorised or Unauthorised Absence** |
| **Signed (Headteacher)** | **Date** |
| **Copied to Parents (Date)** | **Register Code** |
| **LA informed of absence/fixed penalty requested** | **Yes/No** |