LEAVE OF ABSENCE – REQUEST FORM

Our Lady & S	St Joseph Catholic Pr	imary School				
To Mr Sean Flood Head Teacher						
Child's Name						
Class						
I request permission for the above named child/children to be absent from school on the following dates:						
From (date) To (date)						
Total Number of Days						
Reason for absence request:						
SignedParent/Carer Date CONFIRMED						
Head:						
This form is to be completed by the parent (preferably with parental responsibility) and forwarded to the Head of the school at least 10 days before the period of absence.	Leave can only be granted under 'exceptional circumstances' Please define what makes this request an 'exceptional circumstance'	Teacher/Attendance Officer X when seen.				

Please note a leave of absence will not be authorised for a family holiday during term time.

You, as parent/carers, have a legal obligation to ensure that your child is in school during term time. Any unauthorised absences will be reported to London Borough of Hackney Attendance Officers.