



St Matthew's CE Primary School
REQUEST FOR A LEAVE OF ABSENCE FROM SCHOOL

This form is to be completed in order to request a leave of absence from school for any reason. **Please be aware that absences for routine appointments for doctor, dentist and opticians and holidays during term time will NOT be authorised.**

Only exceptional circumstances warrant a leave of absence. Schools should consider each application individually taking into account the specific facts and circumstances and relevant background context behind the request. A leave of absence is granted entirely at the headteacher's discretion. If a leave of absence is granted, it is for the headteacher to determine the length of the time the pupil can be away from school. A leave of absence must not be granted unless it has been applied for in advance by the parent who the pupil normally lives with and the headteacher believes the circumstances to be exceptional.

Working together to improve school attendance DfE May 2022, Applies from September 2022

Name(s) and class(es) of child/ren: _____ Year/s _____

Dates of requested absence: From: _____ (date) _____ (time)

Returning: _____ (date) _____ (time)

Reasons for requested absence at this time: _____

Please attach all relevant paperwork e.g. appointment letter, to enable this request to be considered.

Signature of Parent: _____

Date of Request: _____

To Be Completed by School:

Received by School: _____ Date Received: _____

Headteachers Decision: Absence authorised/unauthorised: _____

Comment: _____

Signature: _____

Date: _____