

APPLICATION FOR LEAVE OF ABSENCE FOR EXCEPTIONAL CIRCUMSTANCES

Please read the following guidance carefully.

As parents/carers, you have a legal responsibility to ensure your child's attendance at school. During the academic year, students are at school for 190 days and at home for 175 days.

Please be aware that The Education (Pupil Registration)(England)(Amendment) Regulations 2013, which became law on 1st September 2013 state that Headteachers may not grant any leave of absence during term time unless there are exceptional circumstances. The Headteacher is also required to determine the number of school days a child can be away from school if leave is granted.

Please complete and submit this form if you want the Headteacher/Headteacher's representative to consider your request for your child's leave of absence for exceptional circumstances. We may ask for proof to validate your request.

Unauthorised absence of 5 days or 10 sessions or more may result in the issue of a Penalty Notice

Penalty Notices are issued by the Local Authority in accordance with Surrey County Council's Code of Conduct. The Penalty Notice is £60, per child per parent/carer, if paid within 21 days or £120 if paid after 21 days but within 28 days. Failure to pay the Penalty Notice will result in the Local Authority considering legal proceedings against you in the Magistrates Court.

The Headteacher/Headteacher's representative will consider the reasons for the request carefully and will notify you of the decision. For further information, please refer to our School Attendance Policy.

| | | | |
|---|-----|--------------------|---------------------------|
| Name of Student | | Tutor Group | |
| I am applying for leave of absence for my child for | | | |
| From: | to: | and will involve | days absence from school. |
| The exceptional circumstances for which leave is requested: | | | |
| Has your child already had leave of absence in this school year? YES / NO | | | |
| I also have children at... | | | |
| Signed..... Parent/Carer | | Date | |
| Print name..... | | | |
| Relationship to student..... | | | |

TO BE COMPLETED BY THE HEADTEACHER/HEADTEACHER'S REPRESENTATIVE

| | | | |
|--|--|--|--|
| Name of Student | | Tutor Group | |
| Current Attendance | | % | |
| Having considered your request carefully, my decision is that leave of absence is: | | | |
| Approved | | The absence will be recorded as authorised | |
| Not approved | | The absence will be recorded as unauthorised | |
| Signed..... Headteacher/Headteacher's representative | | Date | |