

Academy:

## Leave of Absence Request Form



Child's Name				Date of Birth		Year	
	For the Pe	riod				No. of	School Days
From:		To:					
	· · · · ·						
For appointments during the	school day:						
Time of Appointment:	e of Appointment: Time child to be colle				Time child will return:		
Please tick the appropriate bo	ox for the type of ab	sence a	nd give tl	he reason be	low:		
Medical/Dental appointment*			Religio	ous Observan	ce		
Visit to another school			Holiday	у			
Special Occasion			Compa	assionate Lea	ve		
*If you are taking your child out of s	school for a medical app	pointment.	vou will n	eed to provide	a copy of the appo	ointment le	etter/text

## Details of Parent/Carers who will be with the child/ren when the leave is taken:

Hazel Slade Primary Academy

1st Parent/Carer		2nd Parent/Carer			
Full Name:		Full Name:			
Address:		Address:			
Town:		Town:			
Postcode:		Postcode:			
Contact No:		Contact No:			
Email:		Email:			

Declaration					
I have considered the implications for both my child and others in making this decision.					
	1st Parent/Carer	2nd Parent/Carer			
Signature:		Signature:			
Date:		Date:			

## **Guidance Notes**

- Parents are asked to consider very carefully the implications for their own child and others before making a decision to remove their child from the education that is provided in Academy term time. Children should only be removed in exceptional circumstances.
- If you intend for your child to be absent, please complete the form overleaf and submit to the academy with at least four weeks' notice. (It is recognised that this timescale may not be possible when the absence request relates to Medical / Dental appointments or Compassionate Leave). Completing this form does not mean your request has been approved.
- The Education (Pupil Registration) Regulations 2013 state that Principals may not grant any leave of absence during term time unless there are *exceptional circumstances* (see below).
- If your leave of absence is either approved and you fail to ensure that your child returns to school by the agreed date or your child takes leave when your leave of absence request is not approved, then the absence will be marked as 'unauthorised' on the attendance register.
- For such 'unauthorised' absence, you may be liable to be issued with a penalty notice (fine). The fine is £60 per parent per child if paid within 21 days, increasing to £120 per parent per child if paid between 21 and 28 days. If one or both parents fail to pay the penalty notice in full, then you may be prosecuted. The school also reserves the right to remove your child from the roll of the school. Where this happens, please be aware that it may not always be possible to re-admit your child to the Academy.

*Exceptional circumstances*: In considering whether any 'exceptional circumstances' apply, the Principal will consider if the reasons are **rare**, **significant**, **unavoidable** and **short**. The Principal will also take into consideration the factors listed below:

- Whether the event for which leave of absence is requested can reasonably take place during school holidays
- Levels of attendance and unauthorised absence over the last 12 months
- Any leave of absence taken previously
- Whether the leave is during any statutory assessment period or will result in not meeting assessment deadlines
- Age and year group of the pupil

The Academy will not consider the following to be exceptional circumstances, please note this list is not exhaustive:

- The availability of cheap holidays
- The availability of the desired accommodation
- An overlap at the beginning or end of the school term
- The working pattern or availability of parental holiday entitlement
- Attendance at a wedding or christening of an extended family member or friend
- Visiting relatives either abroad or in the UK

Parents/carers are not entitled to remove children from our Academies for holidays during term time. If you take your child on holiday during term time you may be liable for a penalty notice being issued.

## For Academy Use Only

Child's Name:	
Attendance % (last 12 months):	
Number of school sessions taken as leave (last 12 months):	

Decision							
Request for the above student(s) to take leave during term time between the dates overleaf is:							
Agreed	Not A	greed Medical/Dental Appointment Letter/Text Provided					
Rationale to decline request:							
No Exceptional Circumstances		Poor Atter	ndance Other*				
*Please specify							
Signature of Principal:					Print Name:	Mrs K. Challinor	
		1					
Notification of Decision Date letter sent to Parent/Car			irent/Care	er:			
Hand delivered	Poste	ed	Emailed		Other		