



Alan Moss Rd Loughborough Leics LE11 4SQ

Tel: 01509 212021

Headteacher: Alex Clark

Tel: 01509 214974

Headteacher: Jo Beaumont

LEAVE OF ABSENCE APPLICATION FORM

SCHOOL..... DATE of APPLICATION

NAME OF CHILD..... DOB.....

START DATE RETURN DATE.....

PARENT NAME Mr/Mrs/Ms/Miss

Please provide full details for the reasons for this request.

1. What are the reasons for your child’s leave of absence?

Please note under the government’s new guide lines it is at the Head’s discretion as to whether this request is accepted or declined. This depends on whether the request meets criteria for **exceptional circumstances**. Parents taking their child out of school where the request has been declined leave themselves at risk of a penalty notice and/or prosecution. Your child may also be removed from the school roll and you will have to re-apply to the Local Authority for a place.

Parent’s Signature Date.....

OFFICE USE

Accepted Declined DATE

Head.....