



Application for absence for in term time

Name of School **WOODLANDS PRIMARY**

DFE Number **2008**

Parents do not have a right to take their children out of school for leave during term time. By law you must ask permission for your child to miss school. If you don't you risk a fine. It is up to the headteacher to decide whether or not the absence will be authorised.

Parents wishing to apply for their child to have leave from school should complete this form and return it to school for authorisation well in advance (at least 2 weeks) of the proposed leave.

PARENTS SECTION (to be completed first)

Surname of child				First name		
Date of birth		Class				
Surname of parent/guardian				First name		
Address of child						
Postcode			Telephone number			
About the request for your child's leave of absence	Reason for taking leave in term-time					
	Would (s)he miss any national tests or examinations?					Yes / No
	Is his/her attendance already below 90% or a previously agreed individual target?					Yes / No
	Is the proposed absence during the month of September?					Yes / No
	Would (s)he be absent for more than ten school days?					Yes / No
	Has (s)he already had leave during term-time this school year? (If so, please give dates and number of school days leave)					Yes / No
	Did (s)he have leave of absence during term-time in the previous school year?					Yes / No
Length of absence (school days)		From (date)		To (date)		
Emergency telephone contact in the Leeds district						
Parent's/Guardian's signature						

SCHOOL SECTION

Leave in Term Time	(i) approved <input type="text"/> school days (ii) not approved <input type="text"/> school days	Leeds policy states that more than five days unauthorised absence in any one term may result in the issuing of a Fixed Penalty Notice.		
Date of Meeting with Parent				
Headteacher's signature				
<input type="checkbox"/> WB White British	<input type="checkbox"/> MC Mixed White/Black Caribbean	<input type="checkbox"/> AK British/Asian Kashmiri	<input type="checkbox"/> CC Chinese	
<input type="checkbox"/> WI White Irish	<input type="checkbox"/> MO Mixed Other	<input type="checkbox"/> AO British/Asian Other	<input type="checkbox"/> CO Other Ethnic Group	
<input type="checkbox"/> WO White Other	<input type="checkbox"/> AB British/Asian Bangladeshi	<input type="checkbox"/> BC British/Black Caribbean	<input type="checkbox"/> Traveller	
<input type="checkbox"/> MF Mixed White & Black African	<input type="checkbox"/> AI British/Asian Indian	<input type="checkbox"/> BF British/Black African	<input type="checkbox"/> Traveller - Irish Heritage	
<input type="checkbox"/> MA Mixed White & Asian	<input type="checkbox"/> AP British/Asian Pakistani	<input type="checkbox"/> BO British/Black Other	<input type="checkbox"/> Traveller - Gypsy/Romas	
Gender of child	<input type="checkbox"/> Female	<input type="checkbox"/> Male	UPN	
Number of previous applications granted				

Please return a copy of this form to the parent after consideration.