Application form for Leave of Absence (LOA) during Term Time

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| **A. Pupil Details** |
| Name: |  | DoB: |  |
| Address: |  |
| Class: |  |

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| **B. Leave of Absence Request Details** |
| Start date of requested leave: |  | End date: |  |
| Return to school date: |  | No. of days: |  |
| What are the exceptional circumstances for your leave of absence request that you wish the school to consider? |
| Name of parent / carer (print): |  |
| Signature: |  | Date: |  |
| Name of parent / carer (print): |  |
| Signature: |  | Date: |  |

Please email this form (fully completed) to office@laceygreen.cheshire.sch.uk or hand in to the office.

The National Framework for Penalty Notices Explained



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| **C. For Office Use** |
| Current attendance %: |  |
| Previous LOA (last 2 consecutive half terms): |  |
| Does the LOA request time coincide with SATS / other examination periods?: |  |
| Any mitigating / aggravating circumstances (Including any ongoing medical issues): |  |
| Is the Leave of Absence (LOA) approved? | **YES** | **NO** |
| If **YES** - Number of days to be authorised for this LOA application: |  |
| Signature of Principal: |  | Date: |  |
| Register Code to be used for this LOA: |  |
| Date | Copy returned to parent/s with letter. |  |
| Copy filed and sent to class teacher – please sign |  |