# Application for Leave of Absence During Term Time

**Ermysted's Grammar School**

This form should be completed by the parent/carer and returned to the School Office by email ([admin@ermysteds.uk](mailto:admin@ermysteds.uk)) as far in advance as possible before the first date of the period of leave being requested. Parents/carers must obtain the schools permission before making any arrangements for leave in exceptional circumstances, otherwise the absence will be recorded as unauthorised.

Before making this application please refer to our Attendance Policy for more information.

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| **Name of Pupil** | Click or tap here to enter text. | **Date of Birth** | Click or tap here to enter text. |
| **Form** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. | | |
| **Leave of Absence Requested** | | | |
| **Start Date of Absence** | Click or tap to enter a date. | **Return Date to School** | Click or tap to enter a date. |
| **Reason for term time absence request (please provide written evidence to support your request)**  Click or tap here to enter text. | | | |
| **Declaration** | | | |
| **I have read and understood the information on leave of absence in term time, unauthorised absences and penalty notices:** | | | |
| **Name of Parent/Carer** | Click or tap here to enter text. | **Date** | Click or tap to enter a date. |
| **Email Address** | Click or tap here to enter text. | | |

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| **FOR SCHOOL USE ONLY** | | | | |
| **The school has considered your request for leave of absence and your child's absences will be recorded as follows:** | | | | |
| **Authorised** | |  | **Unauthorised** |  |
| **Signed** |  | | | |
| **Position** |  | | | |
| **Date** |  | | | |