

Application for Leave during term time To be filled in only by parent or carer

Sign:

Student Name:
Tutor Group:
Date:
I wish to apply for leave from school for my child for the following days: (Note that 15 days' notice prior to the first day of the absence are required)
Leave date:
How many academic days:
Returning to School on:
My proposed destination is:
Please give a full explanation of why this request for leave had been made:
Name of parents/carer:
Address:
Contact Phone Number:
Parent/Carer Signature:
This form must be returned to the Attendance officer Alternatively, this form may be emailed to at attendance@chilmingtongreenschool.org.uk
Official Use:
Approved Not Approved
Vice-Principal

Date: