## **EMMANUEL JUNIOR ACADEMY**Leave of Absence in Term Time Request Form



NAME:	Name of Parent/Carer 1:	
CLASS: YEAR:		
Siblings in this or other schools (Name, DOB, Scho attending):	School D.O.B:  Mobile number:	
	Email:	
	Name of Parent/Carer 2:	
Current address:	D.O.B:	
	Mobile number:	
	 Email:	
	Address of Parent/Carer 2 if different to that on the left:	
(Please ensure school have correct details for all parent		
Requested dates of absence from and to (inclusive):		
FROM: TO:	Number of school days:	
Outline the exceptional circumstances that require your request for leave of absence during term time:		
What steps have you taken to minimise the impact of the leave on your child's learning?		
Emergency Contact Details (UK and Abroad) - name, telephone number & relationship.		
UK:		
Abroad:		
<ul> <li>I confirm that the information on this form is true.</li> <li>I agree to keep the school informed of any changes to my travel arrangements or if my child is unable to return to school on the due date.</li> </ul>		
<ul> <li>I am aware that if my child does not return to school by the date provided that they may lose their place at this school</li> <li>I am aware that I may be fined and/or prosecuted for any time which my child is absent from school that has not been authorised by the Headteacher.</li> </ul>		
<ul> <li>I am aware schools cannot authorise leave of absence including term-time holidays unless there are exceptional circumstances.</li> <li>I am aware that 5 or more consecutive days of unauthorised absence will result in a fixed penalty notice being requested regardless of the child's previous attendance record.</li> </ul>		
Signed by Parent/Carer:	Print name & relationship to child:	

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FAO The Attendance Officer School use only	Date request received:	
Has the request been discussed with the parent/	carer? Date:	
No of school days requested:		
Current Attendance figure%		
If during Autumn or Spring Term, please record p	orevious year's figure here %	
Is leave of absence authorised? Y	ES / NO	
Number of days authorised:	Number of days unauthorised:	
NO Does not meet School Policy		
YES Exceptional circumstances		
Reason for leave of absence not being authorised, please indicate:		
Request Fixed Penalty Notice? YES / NO / N/A		
Date of decision letter sent to parent/carer:		
<ul> <li>Schools cannot authorise leave of absence including term-time holidays unless there are exceptional circumstances.</li> <li>5 or more consecutive days of unauthorised absence will result in a fixed penalty notice being requested regardless of the child's previous attendance record.</li> </ul>		
Headteacher Signature:	Date:	