Hilltop Primary Academy

LEAVE OF ABSENCE REQUEST FORM

PLEASE NOTE: The Education (Pupil Registration) (England) (Amendment) regulations 2013 state that Head Teachers should not grant approval for any leave of absence during term time. Please see the attendance policy on our website for more information.

Name of Child(ren)			Year Group	
			Year Group	
			Year Group	
Child's Address				
Name of applicant/s	1		Phone number	
	2		Phone number	
Address of applicant/	s if different to child			
I / We wish to apply	for our child to be ab	sent from school for	EXCEPTIONAL CIRCU	IMSTANCES.
Dates: From.		To		
Total number of days	requested Nar	nes of Siblings at QEG	S or other	
circumstances:		e the reason for your		u feel it is exceptional
Continue over the p	age if necessary.			
Signed (both applicar	its if applicable)	Date		
1		2		
		HE HEADTEACHER AT	LEAST 15 WORKING	DAYS BEFORE THE
DATE OF REQUESTED	LEAVE.	Date received by	the School office :	
Head teacher outcome				