Downsbrook Primary School



PARENTAL REQUEST TO SCHOOL TO AUTHORISE AN ABSENCE IN EXCEPTIONAL CIRCUMSTANCES

Child's Name	
Date of birth	
Year Group	
Class	
Name of person making request & relationship with child	
Address	
Phone number	
Dates the child will be absent from school	
Dates the child will be absent from school	
Absences will only be authorised if this request is made in (advance of the dates your child will be absent from school
·	There is no entitlement to take a child out of school for a
amily holiday.	
The law states that parents must ensure their children reg	ularly attend school to receive their education. The head
	ularly attend school to receive their education. The head ances. Exceptional is likely to be rare, significant and short.
cacher can only adminise absorbed in exceptional circumsti	ances. Exceptional is likely to be faire, significant and short.
Vhether the absence is exceptional is at the Headteacher	s discretion based on their assessment of the situation and
•	y and a weeks' absence for illness would give an attendance
igure below 95% . The government considers attendance u	nacceptable below 95% .
he Headteacher will consider the reasons for your absenc	e request. You may be asked to provide evidence to support
·	NOT be considered as a good reason for term time absence.
in relation to "unavoidable" absence, the Headteacher will	<u> </u>
cheduled at another time. Issues of cost will not be consid	·
f you wish for this absence to be authorised, you will need	to fully explain (together with evidence) why the
ircumstances of this absence are exceptional.	
Why is this absence exceptional?	
(continue on a separate sheet if necessary)	
	true. I understand that if I do not fully complete this form
• •	Itimately the absence is not authorised, my child's attendance
	that I must ensure my child attends school regularly and the
	al proceeding being taken against me, either through a Fixeo
enalty Notice or by prosecution in the Magistrate's Court.	
ionad:	Note:
Signed:	Date:
Parent/Carer)	
Full Name:	

Unless further information is required, a decision will be sent to you within 5 school days.

School Office to	complete th	nis section:					
Last Academic Year Attendance	%	Green Amber Red	GREEN	MORE THAN 95%	ATISFACTORY		
Current % Attendance		Green	AMBER	85% TO 95% NEEDS	IMPROVEMENT		
	Amber Red	RED	LESS THAN 85% UNS	SATISFACTORY			
HOLIDAY TAKEN SO FAR THIS ACADEMIC YEAR		DAY	' 5				
Headteacher to co	omplete thi	s section:					
Your request is app	proved and	the absence as	set out ov	erleaf is authorised.			
be recorded as und	authorised f not grant onal circum	or the following any leave of a	ng the follow absence du	ring term time unless	I		
Signed:			Dated:				