



ALL SAINTS BENHILTON C of E PRIMARY SCHOOL
Term Time Absence Request

Name(s) of Child(ren) Class

..... Class

..... Class

Address

I request permission for the above children to be absent from school

from to (please insert dates)

for the following reason

.....

.....

* Please note that taking a holiday in term time means that children miss important school time and it is difficult for them to catch up on work. Absence due to availability of holidays at a cheaper rate, or poor weather experienced in school holiday periods are not valid reasons for approved absence.

Approval of absence will be at the discretion of the Headteacher and the Governing Body.

Unless it is an emergency, please give at least 14 days notice when applying for leave of absence.

J. Whelan-Cox (Headteacher)

Signature of Parent/Carer Date

Number of school days taken to date (office use only)
.....

ALL SAINTS BENHILTON C.of E. PRIMARY SCHOOL

Name

Request for leave of absence from school on/between and

(days) has been approved / has not been approved. Total number of days this year

Signed(Headteacher) Date