Notification of Term Time Leave (one form per family) Before completing this form please ensure you have understood schools policy for term time leave

Name of Pupil	Name of Pare		'S 1:(please ensure school carers)
Siblings in this or other schools			
(name, dob, name of school)	Parent/Carer	1 DoB:	
Current address:	Name of Pare	ent/carer 2	::
	Parent/carer	2 DoB:	
Dates of leave. From To			
Notifications for leave during term time should be authorised by the head teacher if the reason is considered to be an exceptional circumstance. Reason for leave:			
Do you consider there to be exceptional circumstances (please indicate)?			
Yes (please attach additional information/evidence to support your circumstances)			
No			
Where will you be staying during the leave period? Please provide the full address and Emergency Contact Details (UK and Abroad) UK:			
Abroad:			
 I confirm that the information on this form is true 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 to due date I am aware that if my child does not return to school by the date provided that he/she is at risk of losing their place at this school 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 Signed by parent/carer	by the Head teacher. Print name & relations	nin to	Date
orginaa ay paranaaana.	child		
For school use only	Date request receiv	ed /	1
Has the notification been considered by the Head teacher? Y/N Has the notification been discussed with the parent/carer? Y/NDate: No of days Authorised			
Date of decision letter sent to parent/carer (only if leave is to be granted) :			
If unauthorised leave is taken and this case complies with Penalty Notice criteria please forward to CILS along with Pupil/student attendance register.			
Name of school	Head teacher's sig	nature	Date