

# School Logo

Directorate for Children, Young People and Families

Leave of Absence Request Reply

Name of Child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form / Year Group: \_\_\_\_\_

Period of absence: from \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_ to \_\_\_/\_\_\_\_/\_\_\_\_

Permission to take leave of absence is granted

Permission to take leave of absence is **not** granted

**Reason(s) for permission not being granted**: **Tick all boxes that apply**

No exceptional circumstances given why leave of absence taken in term time

Attendance is less than the school’s attendance target of %

Previous leave of absence taken in same academic year

Overall attendance last academic year unsatisfactory i.e. below the school’s attendance target (any applications for leave of absence during the first term September to December only

Negative impact on Pupil Progress if leave of absence taken in the first half of the first term September to October only

No letter from employer

External exams/assessments near or during time of proposed leave

Internal exams/assessments near during time of proposed leave

Other reasons ………………………………………………………………………………

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Signed: ………………………………………………

Name & Job Title: ………………………………………………………………………….