**Upper Shirley High School **

**Leave of Absence Application Form 2024/2025**

Parents/Carers/Guardians have a legal responsibility to ensure their child/children’s attendance at school. Good attendance is linked to higher achievement. Under Government legislation, the Headteacher is only able to authorise leave of absence of a pupil during term time, if they deem the reason/s given for the leave of absence to be exceptional circumstances. The Headteacher will consider your application using the information you have provided below so please include as much information as possible. You will be notified of the Headteacher’s decision in writing.

**Applications should be received at least three weeks in advance to allow consideration**

**Pupil Information:**

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| --- | --- | --- | --- | --- |
| **FORENAME** | **SURNAME** | **DATE OF BIRTH** | **YEAR GROUP** | **CLASS/TUTOR** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Details of siblings at other schools that will be travelling:** *(Please note that we may contact these school/s in relation to this application)****Name of sibling/s: Current school/schools:*** |
| **I am applying for leave of absence for my child/children** **from:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Total number of school days absent:** |
| **Please explain fully the purpose of this absence & why it cannot take place during the 13 out of term time weeks:** |
| **Name of City/Country being visited during the leave of absence?** *Please note, we may ask for outbound and inbound flight confirmation concerning the leave of absence.* |  |
| **Parent/s email addresses and contact telephone numbers whilst on the leave of absence:** | **Email:****Telephone Number:****Current Address:** |
| **Has your child had leave of absence in the last 12 months?****If yes, please provide dates/details:** | **Yes/No**  |

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| **I submit the information above for consideration by the Headteacher:** | **Signed: Printed:** **Relationship to Pupil:****Date:** |