Request for child absence during term time	
Please attach any relevant medical documentation to this form. All other absence will be recorded as unauthorised. Please see our attendance policy for more information.	
Child's name	
Date of birth	
Class Teacher	
Dates/times requested	From: to:
Reason for absence:	
I understand that should my child's absence accrue more than 10 unauthorised sessions (5 days) within 10 weeks may result a fine or court procedures under **Section 444, 1 / 1A Education Act 1996.** FPN 1 £80 (£160), FPN 2 £160 or Court Proceedings.	
Signed (Parent/Carer) ..... Date.....	

OFFICE USE ONLY

CW/KC [ ] date received _____current attendance % _____ Compulsory School age Y/N

BC [ ] date received _____ Authorised/Unauthorised/Not applicable Letter needed Y/N

Diary Date for return onto school calendar [ ] DW to look at [ ]

HS [ ] date received _____ checked information [ ]

CW/KC date received _____ letter sent [ ] date sent_____ added to Arbor [ ]