



APPLICATION FOR LEAVE OF ABSENCE DURING TERM TIME

PLEASE READ THIS INFORMATION CAREFULLY BEFORE FILLING IN THE APPLICATION FORM OVERLEAF

- 1) Parents/Carers **do not** have the legal right to take students out of the academy for the purpose of a holiday.
- 2) The Government now classes any student who is absent for 10% and above as a 'Persistent Absentee'. That means if your child is away 5 days in this half term they will go into this category, therefore a holiday for one week in term time can trigger this.
- 3) The new amendments to the school attendance regulations state:

Term-time Holiday

'Amendments to the 2006 regulations remove references to family holiday and extended leave as well as the statutory threshold of ten school days. The amendments make clear that headteachers may not grant any leave of absence during term time unless there are exceptional circumstances'.

This means that unless there are 'exceptional circumstances' your child's absence **will not** be authorised.

- 4) Persistently absent students will be referred to Nottinghamshire Education Authority, The Family Service and this may lead to a summons being issued against you for irregular school attendance and/or Social Care involvement.

Having read these notes, if you still wish to apply for a leave of absence for your child to accompany you during term time then please complete the application overleaf. This form should be returned to Student Reception as far in advance of the proposed absence as possible.

**APPLICATION BY PARENT/CARER FOR LEAVE OF ABSENCE
FROM THE ACADEMY DURING TERM TIME**

Student's Name: _____ Reg. Group: _____

Home Address: _____

I wish to apply for my child to be absent from school during the following dates:

Last day of school: _____ Date of return to school: _____

Total number of days missed: _____

Could you please write a detailed explanation of the need for your child to take a leave of absence during term time.

Do you expect to be needing any more term time absences this academic year? _____

Name of Parent/Carer making the application: _____

Signed: _____

Date: _____

PLEASE RETURN THE COMPLETED APPLICATION FORM TO STUDENT RECEPTION GIVING AT LEAST 2 WEEKS NOTICE OF INTENDED ABSENCE.