



## Exceptional leave absence request form

This form must be completed for any form of absence (with the exception of medical and dental appointments) and it should be submitted for authorisation at least 10 school days before the proposed absence. Please be aware that holidays during term time cannot be authorised.

Please complete this form and return it to [admin@stmichaelsn6.com](mailto:admin@stmichaelsn6.com).

Child's name \_\_\_\_\_  
Class \_\_\_\_\_  
Start date of requested absence \_\_\_\_\_  
Finish date of requested absence \_\_\_\_\_

Reasons for making this request please state below

Parent / guardian \_\_\_\_\_  
Email address \_\_\_\_\_  
Contact number \_\_\_\_\_

If you need to make a request for Exceptional Leave in term time the Head Teacher will take the following into account:

- the effect the absence will have on the child's education, relationships and wellbeing
- the overall pattern of attendance and punctuality
- the time of year (SATs or assessments)
- the particular family circumstances