

Orchard Room and Garden Room Application for Leave of Absence from School during term time

Pupil's full name	
Pupil's Date of Birth	
Room Name	

First date of absence	
Last date of absence	
Date of return to school	

Reason for request:

Full name of person making request	
Relationship to child	
Email address	
Signature	

School Response

Date of response from school	
Date application received by school	

School response to parent/s request for leave of absence

Attendance Lead Signature	
Date	