



Request for Leave During Term Time

Headteacher: Mr David Snell

If you are planning to be away during term time, please provide the following information and return to our school office.

By keeping us informed of your plans, you will be assisting us to plan and keep your child informed of any work or events that they may miss during their absence.

Can we please remind you to consider the effect of the absence on your child's school life.

Please be advised holidays during term time will be unauthorised unless there are exceptional circumstances.

To: The Headteacher of **ALVECHURCH MIDDLE SCHOOL** Date.....
I request consideration of a grant of leave of absence from school during term time for my child (full name)..... Class.....
for the period from (date)..... to(date).....
The reasons for the request are:.....

If applicable, please list any other siblings and the school they attend:

Child Full Name School:
Child Full Name School:
Child Full Name School:

Signatures of those persons with parental responsibility

Name:..... Signature:.....

Name:..... Signature:.....

Please return the completed form to the school office.

The school will write to you informing you on whether the request is authorised or not.

Office use only:

Current attendance% Last year's attendance%
Number of school sessions taken as leave during term time.....(this Academic Year)

Agreed/Not Agreed

Request for leave is agreed/is not agreed for the above student to take leave during term time between the above dates.

Signed..... Dates..... Parent Notified.....



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