

## ABSENCE REQUEST FORM (exceptional circumstances only)

To: The Headteacher of Sir Bernard Lovell Academy

l wish to apply to have an abs	ence authorised, for:		
Child's name	Tutor Gro	Tutor Group	
Child's name	Tutor Gro	Tutor Group	
Date from:	To:	(inclusive)	
Name of Parent(s)/Carer(s):			
Address:			
	Postcode:		
	tional circumstances that you would Please continue on a separate sheet		
Signature of Parent (s)/Carer	(s):	Date:	

## **NOTES TO PARENTS/CARERS**

The law does not grant parents/carers an automatic right to take their children out of school during term time. If the request is for an absence in term time you must have Parental Responsibility and be the parent/carer with whom the child normally lives. Permission **must** be sought in **advance**. If the circumstances relating to this request are considered exceptional and the absence is authorised by the school, the authorising of the absences will be conditional on the child(ren)'s satisfactory attendance up to the date covered by this request.

