



Headteacher: Mrs G. Gibbons
Highcliffe Road, Morley, Leeds, LS27 9LX
Telephone: 0113 323 0554
E-mail: office@stfrancismorley.org.uk
Website: www.stfrancismorley.org.uk

Leave of Absence Request

***PLEASE NOTE THIS FORM MUST BE COMPLETED BEFORE DATE OF LEAVE AND PROVIDE COPIES OF ANY RELEVANT DOCUMENTS INCLUDING TRAVEL DOCUMENTS TO SUPPORT YOUR REQUEST. If any sections are missed we will contact you for further information.**

DATE OF REQUEST:				
First Name	Surname	Date of Birth	Class	
DATES REQUESTED (FROM/TO)				
First day of leave:		Date due back in school:		
Length of absence applied for (number of school days):				
Siblings in other schools: Please note this request information will be shared with the attendance lead in the school in which the sibling/s attend	First Name	Surname	School	
Contact Details				
Parents/Carers:	First name:		First name:	
	Surname:		Surname:	
	Email:		Email:	
	Home phone number:		Home phone number:	
	Mobile:		Mobile:	

Together in truth and faith we learn and grow as God's family



St Francis Catholic Primary School



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Alternative contact details (someone still in Leeds) whilst you are away in case of emergency;

Name:

Contact numbers:

Address:

Email:

Relationship to child:

Reason for absence including full explanation of exceptional circumstances (use a separate sheet of paper if necessary)

How will you be travelling? If by aeroplane, please give name of airport:

Destination:

Date and time of departure:

Flight numbers (to and from) and name of airline:

If your child is not going away with you – who are they going to be with? e.g., grandparents

Who will be caring for / responsible for the child?

Why is/are the parent(s) not leaving with the child?

Details of person/s with responsibility for child during leave request period:

Name:

Relationship to child:

Email address:

Address:

Contact numbers:

If you are a split family – is your child/ren's other parent or carer aware of your leave plans and do they understand that there may be financial implications for them also, if their child has unauthorised leave?

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Statutory Declaration

Legal responsibility

As a parent/carer I understand all children aged between 5 and 16 are required by law to receive an education and under the provisions of the Education Act 1996, it is my responsibility as a parent to ensure the regular school attendance of my children and that failure to do so could result in legal proceedings being taken by the Local Education Authority.

I understand that requests for leave can only be granted by schools if there are **exceptional circumstances** and **holidays are not considered exceptional**. They must also be made to the school in advance, as the **Department for Education** has told schools that they cannot authorise any absences after they have been taken. **These will automatically be marked in the register as unauthorised leave.**

Fines

I understand that, if my request is unauthorised, I am most likely to be fined, **£60 per parent, £60 per child** (for example a family of 4 with 2 parents and 2 children will be fined a total of £240).

**Please be aware that this can impact other parents not residing with the child or residing with the child full time, but who are not related e.g. step parent who has parental responsibility.*

Once the penalty notice is issued, I have **21 days in which to pay the fine**. If I fail to pay in that time period, the fine **will double** and I then have **another seven days in which to pay**, taking the total time in which to make payment to 28 days. **If I fail to make payment after 28 days**, then the local authority has the power to prosecute me in the magistrate's court for the offence of failing to ensure my child attends school regularly. A guilty verdict at court **can lead to a fine of up to £1000 and a criminal record which can affect employment opportunities.**

School places

I am aware that a **referral will be made to the Local Authority Children Missing from Education Team (CME) if my request is unauthorised and my child hasn't returned to school on the agreed date**. This can result in my child **losing their school place**.

I am also aware that there is a shortage of places in the area, so if my child loses their school place it could result in having to travel to a school out of area or without a school, being a detriment to their education and causing implications to my own employment.

Signed _____ Print _____

Date: _____

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For office use

Any previous requests this academic year? Yes <input type="checkbox"/> No <input type="checkbox"/>		Is the requested absence during exams? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Reason for refusal/comments 				
Authorised <input type="checkbox"/>		Approved		Number of School days
Unauthorised <input type="checkbox"/>		Not approved		Number of School days
Current year percentage attendance: 		Previous year's percentage attendance: 		
Signature of Headteacher: 				
Date: 				

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