



**WROCKWARDINE WOOD INFANT SCHOOL
AND NURSERY**

Church Road, Wrockwardine Wood, Telford TF2 7AH
Telephone:(01952) 387860 Fax:(01952) 387864 Headteacher: H2116@telford.gov.uk

Request for Leave in Term Time from School

Date.....

To: The Headteacher of :.....(School)

I request permission for leave in term time from school for my child:

(Full name)

From (date)..... to (date) for School days.

My child will be accompanied during the leave by:

(parent/carer) and (parent/carer).....

The **exceptional circumstances** and reason for this request are: -

(If necessary, please continue on a separate sheet and attach it to this form)

I have (an) other child (ren) in (an) other school(s) as follows

Child(ren) (full name(s)	School(s)
.....
.....

Name of 1st Parent/Carer(s) Signed

Current address.....

Mobile No.....

Name of 2nd Parent/Carer(s) Signed

Current address.....

Mobile No:.....

Please return the completed form to the school office. The school will write to you and inform you of the decision on whether your request is authorised or not. Please do not confirm any holiday booking until you have confirmation of permission for the leave in term time from the Headteacher.

For Office Use Only

Date request for leave in term time received by school

Current Attendance.....% Last Year's Attendance.....%

Number of school sessions previously taken as leave in term time

Re: **Siblings:** other schools confirmed?

What action are other schools taking?

Leave in term time Agreed/Not Agreed

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

Signed Job Title.....

Print Name Date

Notification of decision: Date letter sent to parent.....

Any notes: