

**Children Missing Education Service**  
PO Box 25, Riverside, Temple St, Keynsham, Bristol. BS31 1DN.  
Tel: 01225 - 394241 Fax: 01225 - 394296

**REQUEST FOR ABSENCE**

**PLEASE REMEMBER**

Absence from school can seriously disrupt your child's continuity of learning. Not only do they miss the teaching provided on the days they are away; they are also less well prepared for lessons upon their return. There is a consequent risk of underachievement, which together we must seek to avoid. Please ensure that you have read the school's attendance policy.

I would like to take my son/daughter ..... out of school.

Dates: - From (1<sup>st</sup> day absent from school) .....

To (last day absent from school) .....

My child has siblings attending (name of school).....

This holiday must be in term time because:.....

.....  
.....

Signed.....(Parent/Guardian) Date of Birth.....  
(To be used in the event that legal action becomes necessary)

Relationship to Child.....

Authorised by.....( Headteacher) Date:.....

**This form must be completed and returned to the child's school  
no less than 2 weeks before the planned absence.**

.....

Dear parent/guardian,

Re: .....(Child's name)

CURRENT ATTENDANCE %
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Further to your recent request for leave of absence.

**Leave of absence authorised** between .....and .....  
Please ensure that your child returns to school promptly following the planned absence as failure to do so can result in their removal from the school roll.

**Leave of absence refused.** Any absence from school between .....and ..... will be marked as unauthorised and referred to the Children Missing Education Service who may issue a Penalty Notice of up to £120 (S.444(1) Education Act 1996).

Signed.....(Headteacher) Date:.....