LAMBS LANE PRIMARY SCHOOL LEAVE OF ABSENCE REQUEST FORM

Please be advised that Wokingham Children's Service and the Department of Education have advised schools to only authorise leave of absence/holidays in exceptional circumstances, hence School will not approve any absence in term time, except in such circumstances. Please complete the section below and return to school at least one month before the requested absence. School will endeavour to respond to your request within 5 working days. Please note that taking your child away during the school term is detrimental to educational progress.

Please be aware that if holidays are taken without approval, this information will be passed to our Education Welfare Officer and a Penalty Notice may be issued without further warning. Payment of a Penalty Notice within 21 days is £60, **per parent/carer per pupil,** and payment between 22-28 days, is £120 **per parent/carer per pupil.** Prosecution if no payment is received by day 28.

More details are available on the Wokingham Borough Council website or from the Education Welfare Service.

Pupil's Name:	Year/Class:
Reason for absence in term time. (This must be completed) If the absence is for religious observance, please include the name and contact details of your place of worship.	
Absence Period from: (First day of absence)	To: (Return date to school)
Number of school days to be missed:	
Sibling details: Name(s)	Year/Class:
Signature of Parent(s)/Carer(s):	
Name of Parent(s)/Carer(s):	
DATE:	

SCHOOL USE ONLY:

Attendance%	Unauthorised absence%	Authorised absence%
Previous Year's Attendance%	Has holiday been taken in this school year? YES/NO	

SCHOOL RESPONSE:

Your request for leave of absence has been considered and has/has not been approved		
Signed:	Date:	Name: