

**APPLICATION FOR LEAVE OF ABSENCE DURING TERM TIME**

Taking your child out of school during term time is detrimental to your child’s educational progress and will interrupt their learning opportunities. **There is no legal right to do so.**

A term time absence will only be authorised by the school if there are exceptional circumstances which warrant it. **Education (Pupil Registration) (England) (Amendment) Regulations 2013.**

If the unauthorised leave of absence is taken in term time the Child Missing Education (CME) Service may issue a Penalty Notice for £60 (if paid within 21 days) or £120 (if paid within 28 days) to each parent for each child taken out of school

Guidance states that CME can issue a Penalty Notice for leave of absence taken during term time **irrespective of the student’s current attendance** if the absence lasts for 10 sessions (5 consecutive days) or more.

For shorter leaves of absence which are taken during term time, CME can issue ‘Irregular Attendance Penalty Notice’ if there are other absences which mean that a student has missed 10 or more sessions (5 or more whole days) across a 10 week period. These do not have to be consecutive.

Child’s Full Name Click or tap here to enter text. D.O.B Click or tap here to enter text. Form Click or tap here to enter text.

Child’s Full Address & Postcode Click or tap here to enter text.

 Click or tap here to enter text.

 Click or tap here to enter text.

Click or tap here to enter text.

First Date of Absence: Click or tap here to enter text. Date of Return: Click or tap here to enter text. No. Of Days Requested Click or tap here to enter text.

Please outline the exceptional circumstances below for which a term time leave of absence is being applied for. If no reason is provided the school will not authorise the request. (further details can be written on the reverse or attached to this form)

Click or tap here to enter text.

Name of person making request Click or tap here to enter text. Relationship to Child Click or tap here to enter text. DOB Click or tap here to enter text.

Full Address & Postcode if different from Childs above Click or tap here to enter text.

Email address of Parent/Carer with whom the child residesClick or tap here to enter text. Date Click or tap here to enter text. **FORMS TO BE RETURNED TO THE SCHOOL RECEPTION OR EMAILED TO** **jbuckley@swchs.net**

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Staff Use Only: Date LOAF received by SWCHS ………………/………………/………………

Assistant Headteacher Signature …….……………… Date ………….. Authorised 🞎 Unauthorised 🞎

School Inclusion Officer Signature …………………… Date …………… Authorised 🞎 Unauthorised 🞎