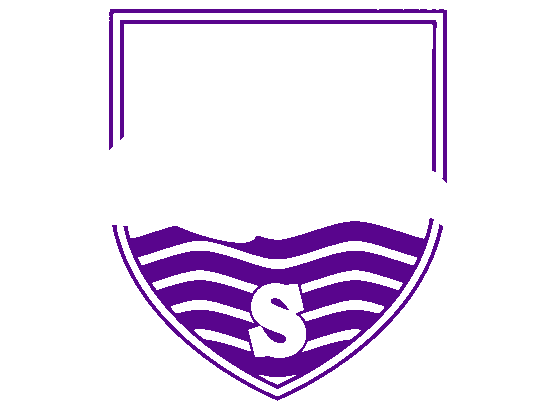
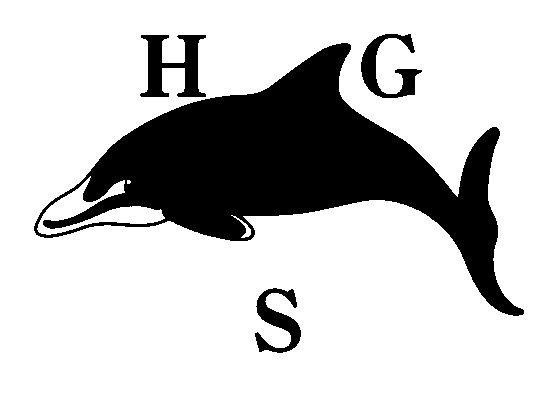
**Hall Green School**



**An Academy**

**EXCEPTIONAL CIRCUMSTANCES - LEAVE IN TERM TIME REQUEST**

Pupil’s Name ………………………………… D.O.B ………….. Form ………

I request permission for the above named pupil(s) to be granted leave during the school term.

Reason for request

…………………………………………………………................................................................

Dates of Absence From ………………………To ……………… No of school days ………

I/We understand that if leave is agreed:

* if travelling abroad, I / we will supply a copy of the return travel documentation.
* I / we will supply the name and phone number of a contact person whilst abroad.
* if I / we do not return at the agreed time; I / we am / are aware that I / we may be issued with a penalty notice, and could be fined £60 or £120 depending on how soon payment is made. If I do not pay the fine, I / we could then be required to attend Court; this could result in a fine of up to £1000 per child and having a criminal record.
* after four weeks of absence my / our child/ren may be removed from the school register and I / we will then be responsible for finding a new school on my / our return.

**IF A CHILD IS TAKEN OUT OF SCHOOL WITHOUT THE HEAD TEACHERS AUTHORISATION, IT WILL BE RECORDED AS UNAUTHORISED. THIS MAY LEAD TO THE ISSUEING OF A PENALTY NOTICE AND LEGAL ACTION BEING TAKEN.**

|  |  |
| --- | --- |
| **Parent/Carer Name**  ……………………………………………………  **DOB**……………………………………………….  **Address**…………………………………………..  **Signature**……………………………………  **Date**………………………………………… | **Parent/Carer Name**  ………………………………………………  **DOB**………………………………………  **Address**……………………………………  **Signature**…………………………………  **Date**…………………………………… |

Request **agreed / denied**

Signed ……………………………………………………………………………. Head Teacher

Dated …………………………

**FOLLOWING THE LEAVE IN TERM TIME YOU WILL BE REQUIRED TO ATTEND A MEETING WITH YOUR CHILD’S HEAD OF HOUSE.**

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