



EWELL GROVE PRIMARY AND NURSERY SCHOOL

APPLICATION FOR LEAVE OF ABSENCE

PLEASE READ THE FOLLOWING GUIDANCE CAREFULLY

Parents have a legal responsibility to ensure their child attends school. Holidays should be taken during the school holiday period in order that your child's education is not unnecessarily disrupted; during the academic year, pupils are at school for 190 days and at home for 175 days.

Holidays taken during term time **will not** be authorised. Requests for leave of absence in Exceptional Circumstances may be treated sympathetically; but as the wording 'Exceptional Circumstances' suggests, this will not apply to the majority of cases.

Ewell Grove's Attendance Policy states, in line with Surrey County Council's policy, that Parents who take their child/children out of school for 5 days or more during term time, without the authority of the Headteacher, are likely to receive a Penalty Notice. Please be aware that **each** parent is liable to receive a penalty for **each** child who incurs unauthorised absence. Penalty Notices will be issued by the Local Authority; the penalty is £60.00 per parent per child if paid within 21 days of receipt of the notice, rising to £120.00 per parent per child if paid after 21 days but within 28 days of receipt of the notice. If the penalty is not paid in full by the end of the 28 day period the Local Authority must prosecute the recipient for failing to ensure regular school attendance under Section 444 Education Act 1996. Failure to pay the Penalty Notice will result in you being served a summons to appear at the Magistrates Court.

If, having read and understood the above, you wish to submit an application for leave of absence, please complete this form. Please note we may ask for proof to back up your request e.g. proof of employers annual leave policy. The Headteacher will consider the reasons for the request carefully and will notify you of the decision within five days. For further information, please refer to our School Attendance Policy.

To BE SIGNED BY ALL ADULTS WITH PARENTAL RESPONSIBILITY OF THE NAMED CHILD/CHILDREN		
Name of Child:		
Class:		
Number of school days requested:		
Dates From / To:		
Details of where you will be staying (including name of country):	Address:	Contact Number:
Exceptional Circumstances you would like the Headteacher to consider:		
Has your child ever had absence with Exceptional Circumstances approved since admission to Ewell Grove: Yes / No		
If YES, please give dates and details:		
Signed by Parent:	Date:	
Signed by Parent	Date:	



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TO BE COMPLETED BY THE HEADTEACHER				
Child's attendance history since admission to Ewell Grove:	Nursery	Reception	Year 1	Year 2
Authorised Absence				
Unauthorised Absence				
Having considered your request carefully, my decision is that your request for absence will be recorded as:				
Authorised		Unauthorised		
Comments:				
Signed:		Date:		
Mrs Kate Keane Headteacher				