



Kington St. Michael C.E. Primary School

Head Teacher: Mrs Victoria O'Brien, DipTch, BEd, EYPS

The Ridings
Kington St. Michael
Chippenham
Wiltshire
SN14 6JG

REQUEST FOR LEAVE TO BE ABSENT IN TERM TIME (other than holiday)

Dear Parents,

All parents will understand that regular attendance at school is necessary for children to make good progress with their education. Therefore we hope that appointments will be made after school ends. However, we appreciate that this may not always be possible and other circumstances may arise.

Child's name: _____ Class: _____

I am requesting that my child be absent from school on: _____

From _____ to _____

Please give the full reason for requesting leave of absence in term time.

Full name of Parent/Carer: _____

Signature of Parent/Carer: _____

For school use:

Attendance: _____ % Confirmation sent to Parent
Request authorised: Yes / No Noted on SIMs
Signature: _____

Date: _____

Initials: _____

RESPONSE TO REQUEST FOR LEAVE

I am writing to inform you that you have been granted permission for the below request for leave.

Child: _____ Class: _____

To be absent from school on: _____ From: _____ To: _____

Yours sincerely,

Mrs V O'Brien
Head teacher

"Learning together, aiming high"

