



ABBOT ALPHEGE ACADEMY  
Beckford Drive, Lansdown, Bath, BA1 9AU

REQUEST FOR ABSENCE

PLEASE REMEMBER

Absence from school can seriously disrupt your child's continuity of learning. Not only do they miss the teaching provided on the days they are away; they are also less well prepared for lessons upon their return. There is a consequent risk of underachievement, which together we must seek to avoid. Please ensure that you have read the school's attendance policy.

Child's Name .....Class : .....

I would like to take my son/daughter out of school:

Dates: From.....to.....

The absence is because:.....

.....

Signed : .....(Parent/Guardian) Date : .....

Relationship to Child : .....

Authorised by : .....( SCHOOL OFFICE) Date : .....

**This form must be completed and returned to the child's school  
no less than 2 weeks before the planned absence.**

Dear Parent/Guardian

CURRENT ATTENDANCE %
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RE: ..... (Child's Name) Class : .....

Further to your recent request for leave of absence.

**Leave of absence authorised** between .....and .....  
Please ensure that your child returns to school promptly following the planned absence as failure to do so can result in their removal from the school roll.

**Leave of absence refused.** Any absence from school between .....and ..... will be marked as unauthorised and referred to the Children Missing Education Service who may issue a Penalty Notice of up to £120 (S.444(1) Education Act 1996).

Signed : .....(SCHOOL OFFICE) Date : .....