Notification for Term Time Leave (one form per child)

Name of School: King Ecgbert School, Totley Brook Road, Dore, Sheffield, S17 3QU Complete and return for the attention of Mr Haigh, Headteacher at least 1 month before requested dates.

Name of Student		Name of Parents or Care	rs
Year / House Form		Telephone number	
Siblings in this or other schools name of school)	(name, dob,	Email	
Dates of leave requested. From To			
Requests for leave during term time should be authorised by the head teacher if the reason is considered to be an exceptional circumstance. Reason for leave: Why would you like to apply for exceptional circumstances? (Please attach additional information/evidence to support the circumstances)			
Where will you be staying during the leave period? Please provide the full address and Emergency Contact Details (UK and Abroad) UK: Abroad:			
 I confirm that the information on this form is true I agree to keep the school informed of any changes to my travel arrangements or if my child is unable to return to school on the due date I am aware that if my child does not return to school by the date provided that he/she is at risk of losing their place at this school I am aware that I may be fined and/or prosecuted for any time which my child is absent from school that has not been authorised by the Head teacher. Signed by parent/carer 			
For school use only	Date request re	eceived / /	
Has the request been considered by the Head teacher? Y/N Has the request been discussed with the parent/carer? Y/N No. of school days Requested No. of days Authorised No. of days Unauthorised Date of decision letter sent to parent/carer: If unauthorised leave is taken and this case complies with Penalty Notice criteria please forward to CILS along with Pupil/student attendance register.			
Name of School: KING ECGBERT SCHOOL	Headteacher's	signature	Date