

St Joseph's Catholic Primary School Diocese of Clifton



Inspiring everyone to REACH through Faith, Hope, Love

Front Street, Nympsfield, Stonehouse, Gloucestershire GL10 3TY
Telephone/Fax No: 01453 860311 Email: SLT@st-josephs.gloucs.sch.uk
Website: www.st-josephs-nympsfield.com

Acting Headteacher: Mrs Clare Howells Request for a leave of absence during term time

Pupil Name		Class	
Pupil's address			
	of absence		of return to school
Number of schoo	ol days that your child will be absent from schoo	1	
	return within 10 school days following the anticipa elete your child's name from the Admissions Register		and no reason is provided, there may be grounds (under some is a Child Missing in Education.
	exceptional circumstances for which you are req		
that this is a fine do not pay this i			to each parent for each child taken out of school and if paid between 21 and 28 days. I understand that if I
Dr/Mr/Mrs/Mis	ss/Ms		
Forename		Surname	
Address			
Signed		Dated	
Dr/Mr/Mrs/Mis	ss/Ms		
Forename		Surname	
Address			
Signed		Dated	
(Please ensure you are giving at least 7 days' notice of the proposed absence, retrospective applications cannot be authorised)			

G:Winword/Attendance figures/Appendix 1 form for leave of absence during term time

For school to complete and copy retained: AUTHORISED







UNAUTHORISED (please circle)

