



GREAT DODDINGTON PRIMARY SCHOOL

REQUEST FOR EXCEPTIONAL LEAVE

Name of Child/ren:

Class:

Please indicate below why you are asking for absence during term time for your child/ren.

Destination:

Reason:

.....

DATES

From:..... (please include first day absent from school)

To:..... (please include last day absent from school)

Total no. of school days absent:

Parents/guardian signature:

Date:

AUTHORISATION

Confirmed by Head Teacher:

Date:

No. of days authorised: No. of days unauthorised:

Office use only

Register Class Teacher Parent Attendance module