



Folly Road, Great Waldingfield, Sudbury, SUFFOLK. CO10 0RR
TEL: 01787 374055

Please complete this form if you consider an absence during term time to be an **exceptional circumstance** and return it to the school office **at least 15 school days** before the date you wish to remove your child from school.

Pupil Name: _____ DOB: _____ Year: _____

Home address:

Name of Parent / Carer completing this form: _____

First day of absence: _____ Date of return to school: _____

If leaving your home address before the first day of absence, please provide the date on which you will leave
_____.

Total number of days missed. _____ days.

Reason for absence. Please refer to the school absence policy and explain why this absence meets the criteria to be an **exceptional circumstance**. Continue on a separate piece of paper if necessary. Mrs Baker may call for further clarification if necessary.

Supporting evidence: If you have any further supporting evidence which explains why this is an exceptional circumstance, please do attach.

I understand that if the absence request is unauthorised the school may request that the Local Authority issues a Penalty Notice. I understand that a Penalty Notice is issued to each liable parent / carer of each child taken out of school and that this carries a fine of £80 (if paid within 21 days), increasing to £160 per parent per child for a first offence. A second offence within 3 years will result in a fine of £160 per parent per child. A third offence in 3 years will result in a referral to an Educational Welfare Officer to be considered for prosecution.

I understand that parents have a duty to ensure their child's regular attendance at school and a failure to do so is an offence under Section 444(1) and Section 444(1A) of the Education Act 1996.

Please inform us if you have a child in another local school. We will need to contact the school to discuss the absence request. Please note, we will need to share information about your child with the other school.

Name of child: _____ Year: _____ School: _____

Signed: _____ Dated: _____

Below to be completed by the school

FAO – Headteacher

% Current	% Last Year	Comments

Pupil Name: _____ Year _____

AUTHORISED:

Request has been authorised for the following dates **only**:

_____ to _____

UNAUTHORISED:

Signed _____ Headteacher Date _____

Letter sent / Phone Call	Signed:	Date:
Action: Penalty Notice Request	Signed:	Date: