

EXCEPTIONAL CIRCUMSTANCES REQUEST FORM SCHOOL:



DATE OF REQUEST:

| Name of Children: | First Name | Surname | | Class | | |
|--|-------------------------------------|--------------|--------------------------------|-----------|--|--|
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| Leaving date: | Date due back in school: | | | | | |
| Length of absence applied for (number of school days only): | | | days | | | |
| | | | | | | |
| Siblings in other | First Name | Surname | | School | | |
| schools: Please note this | | | | | | |
| request information will | | | | | | |
| be shared with the at- tendance lead in the | | | | | | |
| school in which the sib- | | | | | | |
| ling/s attend | | | | | | |
| | | | | | | |
| Contact Details | | | | | | |
| Parents: | First name: | | First name: | | | |
| (eg. Mother, Father, Grand-parent, Carer): | Surname: | | Surname: | | | |
| , | | | | | | |
| | Address: | | Address: | | | |
| | | | | | | |
| | | | | | | |
| | | Postcode: | | Postcode: | | |
| | Email: | | Email: | | | |
| | Home phone number | : | Home phone number: | | | |
| | Mobile: | | Mobile: | | | |
| | Alternative number while away: | | Alternative number while away: | | | |
| | · | | | - | | |
| | | | | | | |
| Reason for absence including full explanation (use a separate sheet of paper if necessary) | | | | | | |
| | | | | | | |
| The exceptional circumstances are | | | | | | |
| | | | | | | |
| | | | | | | |
| Point of departure (eg. Airport, Coach, Train | | Destination: | | | | |
| Station etc.): | | | | | | |
| | | | | | | |
| Time of departure: | Flight numbers and name of airline: | | | | | |
| | | 5 | | | | |

| Emergency Contact Details (preferably someone who is staying in Leeds): | *Provide copies of travel plau request.* | ns to support your | |
|--|--|--|--|
| First Name: Surname: | If child is not leaving with parent(s) who is accompanying them? | | |
| Address: | Who will be caring/responsible | for the child? | |
| Postcode: | | | |
| Relationship to the child: | Why is/are the parent(s) not lea | aving with the child? | |
| Contact Number: | | | |
| | Name: | | |
| | Relationship to child: | | |
| Statutory Declaration Legal responsibility As a parent/guardian I understand all children aged between under the provisions of the Education Act 1996, it is my remy children and that failure to do so could result in legal I understand that requests for leave can only be granted by considered exceptional. They must also be made to the scattat they cannot authorise any absences after they have be fines I understand if my request is unauthorised I am most likely with 2 parents and 2 children will be fined a total of £240). Once the penalty notice is issued, I have 21 days in which to and I then have another seven days in which to pay, takin offence of failing to ensure my child attends school regular criminal record which can affect employment opportuniti School places I am aware that a referral will be made to the Local Authorised and my child hasn't returned to school on the seven also aware that there are a shortage of places in the contained to the school on the seven also aware that there are a shortage of places in the contained to the school on the seven also aware that there are a shortage of places in the contained to the school on the seven as a shortage of places in the contained to the school on the seven as a shortage of places in the contained to the school on the school of the sch | esponsibility as a parent to ensure the proceedings being taken by the Local sy schools if there are exceptional circulation in advance, as the Department freen taken. It to be fined, £60 per parent, £60 per to pay the fine. If I fail to pay in that the gament of the total time in which to make pay the fine of the power to prosecute mentally. A guilty verdict at court can lead the second court can lead t | the regular school attendance of all Education Authority. Sumstances, and holidays are not for Education has told schools Child (for example a family of 4 Time period, the fine will double arment to 28 days. The magistrate's court for the for a fine of up to £1000, and a and Team (CME) if my request is child losing their school place. | |
| travel to a school out of area or my child without a school. | | | |
| Parent's Full Name: Parer | s Signature: Date: | | |
| Parent's Full Name: Parer | nt's Signature: | Date: | |
| School Section | Is the requested absence during | ng exams Yes □ No | |
| Any previous request Yes □ No □ | | | |
| Reason for refusal/Comments | | | |
| | Approved | for School days | |
| | Not approved | for School days | |
| Headteacher's Signature | | Date: | |