

Dixons Allerton Academy – Reason for leave during term time

To : M Sanderson (Head of Secondary) / A Metcalfe (Head of Primary) Date :.....

I request consideration of a grant of leave of absence from school during term time for :

My child (full name)..... Reg Group.....

For the period from (date)..... To (date).....

Please state your destination

The exceptional circumstances and reason for this request are :

.....
.....
.....

Siblings (if applicable)

My child (full name)..... Reg Group.....

My child (full name)..... Reg Group.....

My child (full name)..... Reg Group.....

(Signature of 1st parent/carer(s)..... Print Name

(Signature of 2nd parent/carer(s).....Print Name

Please return completed form to the school reception. The school will write to you and inform you of the decision on whether the request is authorised or not.

FOR OFFICE USE ONLY

Current Attendance..... % Last Year's Attendance..... %

Number of sessions requested for leave during term time.....(this academic year)

Request for leave is agreed/is not agreed for the above student to take leave during term time between the above dates

Rationale to decline request

Signed Date.....



