



## Student Leave of Absence for Exceptional Circumstances

Please use for all leave **other than medical and illness**. Email a signed and completed form directly to [cwa@johnport.derbyshire.sch.uk](mailto:cwa@johnport.derbyshire.sch.uk) or hand in to the Attendance Officer. The Education (Pupil Registration) (England) (Amendment) Regulations 2013 state that Headteacher's should not grant approval for any leave of absence during term-time, including holidays, unless there are exceptional circumstances.

Student Name ..... Form .....

Absence from: ..... To:..... (incl)

Please consider leave of absence for the following **Exceptional Circumstances**:

Supporting Evidence attached - please tick  Use overleaf if necessary

**Parent/Guardian making the application – Where leave is denied and you proceed to take your child out of school unauthorised absence will be recorded. This may result in a Penalty Notice.**

Name: .....

Signature: ..... Date .....

Email address & Contact Number .....  
Where no email available a response will be forwarded to home address

Separated Parent Details (if applicable) – please note in such cases both parties are informed of School's decision.

Name: .....

Is Separated Parent in agreement to application Yes/No please delete

Email address and Contact Number .....  
Where no email available a response will be forwarded to home address

**Sibling at Another School:** Yes/No Name of School .....

**OFFICE USE ONLY:** Date Received .....

Comment:

Request Approved Request Denied Signed: ..... Date .....

Date parent notified ..... Sep. parent notified .....