

Children & Young Peoples Services

ABSENCE OF PUPIL  
FROM SCHOOL ON ANNUAL HOLIDAY

*This form should be completed by the parent/guardian and forwarded to the Head of the pupil's school for signature and approval before the period of absence.*

Name of Pupil:..... Class .....

Home Address.....  
.....

Eastfield Primary

School Attended.....

Will be absent from school from.....  
(1<sup>st</sup> day of absence)

Will return to school on .....

going on annual holiday to.....  
(destination)

Signed..... (Parent/Guardian)

Date.....

*NOTE: Under Regulation 8 (3) (4) of Education (Pupils registration) Regulations 1995, a pupil may be granted leave of absence during term time for not more than two weeks in any academic year for an annual holiday.*

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HOLIDAY REQUEST - RESPONSE SLIP

Name of Child..... Class.....

School Career Attendance Percentage .....

Dates Authorised .....

*(Maximum of 10 days in any academic year)*

*Dates Unauthorised* ..... *Fixed Penalty to be issued*

Signature ..... *(Headteacher on behalf of the Governing Body)*