

**Request for consideration of Exceptional  
Leave from St Leonard's C E Primary  
School**



I wish my child/children \_\_\_\_\_

to take leave from school from \_\_\_\_\_ until \_\_\_\_\_ .

A total of \_\_\_\_\_ school days.

Current year group(s)/ class(es) \_\_\_\_\_/\_\_\_\_\_.

I believe this is exceptional circumstances. The reason(s) for this request are:

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I understand that holidays cannot be authorised under any circumstances.

Absence may be authorised for a maximum of 2 days only for attending a funeral, hospital appointments and compassionate leave. Prior instances of exceptional leave and current attendance will be considered when making a decision. I understand that I may need to provide proof of these exceptional circumstances, before this absence is agreed.

Signed \_\_\_\_\_ Name \_\_\_\_\_

Contact number \_\_\_\_\_ Date \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Declined/Approved by Headteacher \_\_\_\_\_ date \_\_\_\_\_

Declined/ Approved by Governors \_\_\_\_\_ date \_\_\_\_\_

Parents advised telephone/letter/text/ date \_\_\_\_\_

Register marked accordingly \_\_\_\_\_ date \_\_\_\_\_