**Application for authorisation of absence during term time**

|  |  |
| --- | --- |
| Name of child(ren)   |   |
| Class(es)   |   |
| Dates of proposed Absence   | From:  To:   |
| Reason for proposed absence. (exceptional circumstances – please continue on a separate sheet if necessary)  |   |
| Signature and name in block  |     |
| Date   |   |

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 For Office use only

|  |  |
| --- | --- |
| Exceptional Circumstances  | YES/NO  |
| Authorised or Unauthorised   |   |
| Signature |  |
| Date  |   |
| INPUT TO SIMS (initial)  |   |