**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) |  |