

PUPIL LEAVE OF ABSENCE REQUEST

This form should be submitted to the School office at least 48 hours before the date of the requested planned absence.

Pupil's Name:	
Year:	

Day and date of absence:	
(If not a full day, please state the times of absence)	
Reason for absence:	
Please attach any relevant information or email to admin@stmarys565.herts.sch.uk.	

Parents'/Carers' Signature:	Date:	

For Headteacher use only	For office use only
 Absence authorised Absence unauthorised 	Details entered on Arbor

Headteacher's Signature:	Date:	
Office Signature:	Date:	

Please note as per our policy, all unauthorised absence is at risk of a Fixed Penalty Notice.