The Bliss Charity School Leave of Absence Request Form 2013/2014

Please ensure you have read the guidance notes

NAME OF CHILD(REN)	CLASS
I request permission for the above child(ren) to be absent from school:	
First day of absence: Last day of abset (inclusive)	ence:
Number of school days requested	
Reason for absence	
SIGNED: DATE:	
PRINT PARENT'S/GUARDIAN'S NAME:	
Confirmed Leave of Absence	
Date passed to Headteacher:	
Number of previous requests	
Request approved: Yes / No	
HEADTEACHERS SIGNATURE	Date