

WITTON CHURCH WALK CE NURSERY & PRIMARY SCHOOL
REQUEST FOR LEAVE OF ABSENCE



Name/s of child/children:		Year group/s:
Do you have any children in other schools? If yes, please write name of child/children and their school:		
State reason for absence:		
First day of absence:	Total number of school days that will be missed:	
Return date to school:		
Signature (parent/carer):	Date:	
Signature (parent/carer):	Date:	

For School Use Only			
Current Attendance	%		
Current Attainment	Below / On Track / Exceeding		
Headteacher's decision:	<table border="0"> <tr> <td align="center">Authorised Absence</td> <td align="center">Unauthorised Absence</td> </tr> </table>	Authorised Absence	Unauthorised Absence
Authorised Absence	Unauthorised Absence		
Reason for authorising or not authorising absence:			
Signed (Headteacher):	Date:		
Copied to parents (Date):	Register Code:		
LA informed of absence/fixed penalty requested: Yes / No			