

TERM TIME LEAVE REQUEST FORM

This form should be completed and submitted to the school office at least 2 weeks before the start of the proposed term time leave. Separate forms should be completed for each child.

There are only 190 statutory school days in one year and 175 days (weekends and school holidays) available to use for holidays or leave. Therefore, every school day counts!

<https://www.cambridgeshire.gov.uk/residents/children-and-families/schools-learning/education-your-rights-and-responsibilities/term-time-holidays>

The law states that headteachers may not grant any leave of absence during term time unless there are exceptional circumstances. Headteachers should determine the number of school days a child can be away from school if the leave is granted.

Parents/carers are reminded that term time leave taken without authorisation, or not returning on the stated date may result in the issuing of an education penalty fine by the Local Authority of £80 (rising to £160 if paid within 22 to 28 days) per parent per child or under certain circumstances prosecution in the magistrates' court. If this is your second penalty notice since 19 August 2024 for the same child, then the amount of the penalty notice fine is £160.

For full information on penalty fines see <https://www.cambridgeshire.gov.uk/residents/children-and-families/schools-learning/education-your-rights-and-responsibilities/non-attendance-and-the-law>

If the circumstances relating to this request are considered exceptional then authorising of the absences will be conditional on the child(ren)'s attendance being satisfactory up to the date covered by this request.

Name of child:		Year/Class:	
Name and address of the parent /carer(s) the pupil resides with (child home address):			
Name and address of the parent/carer(s) who is accompanying the pupil on the leave of absence (if different to above)			
Telephone:			
Email:			
Start date of proposed leave of absence:			
End date of proposed leave of absence:			
Date that child will return to school:			
Place of destination:			
Reasons for request: <i>(Please state why you consider there are exceptional circumstances and provide evidence of this if possible. Continue overleaf if necessary)</i>			

Signed by parent/carer(s) student resides with: _____ Date: _____

Signed by of parent/carer(s) who the student will be accompanying (if different to above): _____



Office use only		Comments / Reasons:
Date form received :	<input type="text"/>	
Number of school days requested:	<input type="text"/>	
Current Attendance %	<input type="text"/> %	
Previous leave of absence request made?	Yes / No Date :	
Evidence Provided ?	Yes / No	
Authorised <input type="checkbox"/>	Registration Code: <input type="text"/>	
Unauthorised <input type="checkbox"/>		
Signed: Headteacher / SLT	<input type="text"/>	
	Date: <input type="text"/>	