

Willington Primary School

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Headteacher: Mrs Harker

Application for Leave of Absence During Term Time

NAME OF CHILD(REN):		CLASS:
NAME(S) OF PARENT(S)/CARER(S)		
1.		
2.		
FIRST DAY OF ABSENCE:	LAST DAY OF ABSENCE:	
TOTAL NUMBER OF DAYS ABSENT FROM SCHOOL:		
REASON FOR APPLICATION (PLEASE GIVE SUFFICIENT DETAIL TO INFORM DECISION MAKING):		
DETAILS OF ANY OTHER APPLICATIONS FOR LEAVE OF ABSENCE IN SCHOOL TERM TIME:		
SIGNATURE OF PARENT/CARER	DATE:	
FOR OFFICE USE		
ATTENDANCE TO DATE (CURRENT ACADEMIC Y AUTHORISED:	'EAR): UNAUTHORISED:	
PERSISTENT ABSENTEE: YES/NO	ONAU I HOKISED:	
LEAVE OF ABSENCE AUTHORISED BY:	LEAVE OF ABSENCE UNA	AUTHORISED BY:
DATE:		
COMMENTS:		
Please submit this form to the Headteacher prior to booking any heliday. Your focuses will be		

Please submit this form to the Headteacher prior to booking any holiday. Your request will be considered and you will receive a response within 8 school days of receipt.

