Exceptional Leave of Absence Form



Student's name and form group:	EVERY CHILD SUCCEEDS
	Principal:
Date of Absence:	Richard Baker Charlestown Road St Austell Cornwall
	PL25 3NR
Reason for requesting permission for exceptional leave during term time:	44 (0)1726 72163 44 (0)1726 64901 enquiries@penrice.org.uk www.penrice.org.uk
Signature of Parent/Carer:	
Date:	
For office use only	
□ Authorised	
☐ Unauthorised	
Signed on behalf of Penrice:	Part of Peninsula Learning Trust, a company limited by guarantee. Registered in England and Wales at Charlestown Road, St Austell PL25 3NR. Number 07565242 An exempt charity.













