

Exceptional Leave of Absence Form



Student's name and form group:

.....

Date of Absence:

FromTo

Number of days missed:

Reason for requesting permission for exceptional leave during term time:

EVERY CHILD SUCCEEDS

Head of School:

Lucy Gambier
Charlestown Road
St Austell
Cornwall
PL25 3NR

44 (0)1726 72163

enquiries@penrice.org.uk
www.penrice.org.uk

*I understand that if the absence request is unauthorised the Educational Welfare Service may be notified of the above absence and a Penalty Notice may be issued. I understand that a Penalty Notice is issued to each parent/carer of each child taken out of school and this carries a fine of £60 per parent per child if paid within 21 days, increasing to £120 per parent per child if paid within 28 days. I understand that if I do not pay the fine, it may result in legal action being taken against me. **Parents have a duty to ensure their child's regular attendance at school and failure to do so is an offence under Section 444(1) of the Education Act 1996.***

Signed:..... Date:

For Office use only

Yes - Authorised

No - Unauthorised

Signed on behalf of Penrice Academy:

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