



Someries  
Infant School



EVERY

# DAY COUNTS

## Application for term-time leave of absence from nursery

<b>Child's name:</b>		<b>Child's class:</b>	
----------------------	--	-----------------------	--

Please list your child's siblings and the school they attend:	
Sibling's name	School

**Please provide full reason(s) for this application for term-time leave:**

*Please note that proof of return flights may be requested before considering this application for term-time leave of absence from nursery.*

Please list the dates of your term-time leave request:	
start date	end date
___ / ___ / _____	___ / ___ / _____
How many days leave are you requesting?	What date will your child return to nursery?
_____ days	___ / ___ / _____

*I understand that this application for term-time leave of absence from nursery may not be approved by the Head Teacher and/or Governing Body and that, when considering this request, the Head Teacher and Governing Body will consider the following:*

- my child's attendance rate
- the nature of the request and whether or not this is deemed an exceptional circumstance
- whether the child's parents or carers are restricted in terms of leave granted by their employer

*I also understand that if my child does not return to nursery on the agreed date – or if their period of absence exceeds 10 consecutive days – I risk them losing their nursery place.*

<b>Your signature:</b>		<b>Date:</b>	
------------------------	--	--------------	--

Office use only:						
<b>Child's current attendance rate:</b>		<b>%</b>	<b>Authorised leave to date:</b>			
			<b>%</b>			
<b>Outcome:</b>	<b>Authorised code:</b>	C	H	T	R	Y
	<b>Unauthorised code:</b>	G	O			

APPROVED	NOT APPROVED	Reason (if unauthorised)
<b>School signature:</b>		
<b>Date:</b>	___ / ___ / _____	

*A copy of the school's attendance policy is available upon request.*