

## **YSGOL SAN SIÔR**

Church Walks, Llandudno, Cymru. LL30 2HL FFon/Telephone: 01492 878149 E-bost/E-mail: swyddfa@sansior.conwy.sch.uk Pennaeth/Headteacher: Mr Carl Fitter B-Ed (Hons) NPQH

## Pob Plentyn, Pob Cyfle, Pob Dydd

## APPLICATION BY PARENT/CARER FOR CHILD'S LEAVE OF ABSENCE FROM SCHOOL

If you consider you have to take a holiday in term time, and that you have exceptional circumstances, please complete this form and return to the school at least one week before the date you wish to remove your child from school.

your child from school.	• • • • • • • • • • • • • • • • • • •
Pupil Name:	Class:
First day of absence:	Date of return:
Total days:	
Type of absence (eg holiday; fa	amily wedding; moving home etc):
Reason for absence: Detail wh	y this absence cannot be avoided in term time.
How will you ensure your child	d catches up on their missed learning? (Eg – what steps
will you take whilst away from	school to continue quality learning?)
considered. Please note that such a Penalty co is a fine of £60 which increases to £120 if not	cal Authority will be notified of the holiday taken and a Fixed Penalty Notice could be uld be issued to each parent for each child taken out of school. A Fixed Penalty Notice paid within the first 28 days. Thereafter, if the Penalty remains unpaid this will result in a Court under Section 444 of the 1996 Education Act.
	orise any request for absence where the preceding twelve months here are <u>very exceptional</u> circumstances detailed in the request above.
Name of Parent/Carer making	g application
Contact details:	Date:
School use only	
Date received :	Date responded:
12 month attend :	% AUTHORISED UNAUTHORISED