APPLICATION FOR LEAVE OF ABSENCE FOR ANNUAL HOLIDAY

Please read the notes overleaf before completing this form.

NAME(S) OF PUPIL(S)	TUTOR GROUP

NAME OF PARENT/CARER:
ADDRESS:

DATE OF START OF HOLIDAY:
DATE OF LAST DAY OF HOLIDAY:
DESTINATION:

NAMES OF ADULTS ACCOMPANYING PUPIL(S)	RELATIONSHIP TO PUPIL(S)

REASON FOR TAKING THIS HOLIDAY IN TERM TIME

WHEN DID THE PUPIL(S) LAST TAKE A HOLIDAY (IN TERM OR HOLIDAY TIME)
MONTH: YEAR 20 LENGTH OF HOLIDAY:

IS ANOTHER TERM-TIME HOLIDAY PLANNED DURING THIS SCHOOL YEAR?	
YES/NO (*delete as appropriate)	DETAILS:

Signed …… (Parent/Carer) Date: ……