

SOMERSET COUNTY COUNCIL EDUCATION COMMITTEE

AUTHORISED ABSENCE REQUEST (5 days or more)

We request that this form is returned to school at least two weeks before the date of absence

Name of Pupil.....

Academic Mentor Group

Current Attendance Level.....%

I hereby make application for my son/daughter.....to be absent from school from.....to.....(date inclusive)

My request meets the following exceptional circumstances:

- One or more parents is a member of the armed forces and has been or is due to be deployed overseas within the last or next 6 months and evidence can be provided to support this.
- One or more parents is a member of the police, fire or medical NHS staff who has restricted leave due to their job and evidence can be provided to support this.
- Death of a parent, grandparent, step parent, sibling, step sibling who is living overseas and whose funeral will be overseas.
- Terminal illness of immediate family member (this includes parent, step parent and siblings who have less than 3 months anticipated left to live).

I attach the appropriate evidence to support my request for exceptional circumstances.

Signed..... Parent/ Guardian

Print Name

Date.....

ABSENCE REQUEST REPLY SLIP: TO BE ISSUED TO PUPIL TO TAKE HOME

Name of ChildAcademic Mentor Group

I am informing you that your request for your child to be absent from school from to has / has not been agreed.

The reason(s) for not agreeing to the absence:

- Unfortunately it does not meet the exceptional circumstances criteria
- Attendance falls below 85%
- Other