



BISHOP WORDSWORTH'S SCHOOL

Exeter Street, Salisbury, Wilts SP1 2ED 01722 333851

ABSENCE/HOLIDAY REQUEST FORM

Before completing this form, please read the notes below regarding the authorisation of term time absences. Please return this form to either: the Head of Lower School (Mr Brown), the Head of Middle School (Mrs Jenner), the Head of Year 12 (Mrs Gough) or the Head of Year 13 (Mrs Lambard).

Son's Name: Form:

Son's Name: Form:

Son's Name: Form:

I wish to apply for day's absence (number of school days required)

From: (date) To(date)

Reason:

.....

.....

Email address:

Signed Date:
(Parent/guardian)

Notes for Completion:

1. Absences can only be authorised by the relevant Pastoral Head (of Lower School, Middle School or the Sixth Form).
2. A signature is required on all absence requests.
3. Schools may legally agree absence only in exceptional circumstances, eg when a family needs to spend time together during or after a crisis.
4. Absence may not by Law be authorised for other than exceptional circumstances eg: Availability of cheap holidays, convenience of travel arrangements/ availability of accommodation or to overlap with the beginning or end of term.
5. If the school does not authorise a request, the absence will be noted as unauthorised and the parent may be liable for a Fixed Penalty Notice.
6. The relevant Pastoral Head will determine the length of any absence agreed.

For school use:

Absence authorised: Y / N Authorised by: DGB/MJJ/AJG/ZHL Date:

Dates noted: (Sims) Tutor: Reply to parents:

Code: