



BRADSHAW COMMUNITY PRIMARY SCHOOL

REQUEST FOR ABSENCE FROM SCHOOL

Please fill in the details below requesting absence permission. The bottom of the form will then be returned to you stating whether or not the absence is authorised or unauthorised.

Name of Pupil _____

Year Group/Teacher _____

Date(s) of Absence From: _____ To _____ (inclusive)

_____ school days absence in total

Reason for absence (please outline any exceptional circumstances that require an absence during term time).

Please note we are able to authorise up to 10 days per year in "exceptional circumstances" but any further requests will be unauthorised as per guidance from Warrington Borough Council Attendance Team.

Signed (Parent) _____

Date _____

Below: For Office Use Only

Dear Parents

Absence for _____ in Class _____

Dates requested. From: _____ To: _____

The absence requested above will be marked on the register as:

AUTHORISED / UNAUTHORISED

Signed

Mr C J Short – Head Learner