



St. Edward's

Catholic Primary School

Greenland Road, Selly Park,
Birmingham, B29 7PN

Tel. 0121 464 1730
Fax. 0121 464 5058
enquiry@stedward.bham.sch.uk
www.stedward.bham.sch.uk

EXCEPTIONAL CIRCUMSTANCES – PUPIL TERM TIME LEAVE REQUEST

Pupil's Name	D.O.B	Class
Pupil's Name	D.O.B	Class
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Why are you requesting an exceptional leave of absence during term time?

.....
.....

Where will you be staying during this period? Please provide the full address and emergency details (UK and Abroad)

.....

If travelling abroad please supply a copy of the travel documents, date of booking and any other relevant documentation at the time of completing this form for consideration.

Dates of Absence request

From To No of school days

- I have taken relevant steps to minimise taking leave during term time
- I confirm that I have provided the correct information and documentation
- If leave has been unauthorised and I decide to proceed with the holiday, then the 'Leave in Term' time process will begin
- I am aware that Penalty Notices may be issued and cases may be taken straight to Court
- I am aware that if my child does not return by the date provided that he/ she is at risk of losing their school place

Please include both parents/ carers when completing this section

Name of parent/carer -	Name of parent/carer -
DOB -	DOB -
Full Address	Address
Postcode	Postcode
Contact details:	Contact details:
Email address:	Email address:

Parent Signature _____ Date _____





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All requests should be submitted and completed at least two weeks prior to holiday dates to allow enough time for your request to be considered. Where there are exceptional circumstances and leave has been granted you will need to complete the form below:

AUTHORISED LEAVE ONLY

Home/School Leave of Absence Contract-

This contract is an agreement between

The Parents/Carer ofand the school.

We have agreed thatwill be absent from school
from (date).....to (date).....

The absence is due to exceptional circumstances and needs to take place at this time because
.....
.....

He/she will return to school on or before

The address he/she will be staying at whilst on leave is
.....

The email address we can be contacted at
is.....

The phone number we can be contacted on is.....

It is understood that if he/she does not return by the agreed date:

- the Local Authority may take legal action/issue a Penalty Notice to each parent for each absent child;
- he/she may be reported to the Local Authority as a missing child and/or removed from the school register in accordance with the School Attendance (Pupil Registration) (England) Regulations 2024.

Parent's/Carer's signature:

Head teacher's signature:

Date:

