



Longsands C.P. School  
Longsands Lane  
Fulwood  
Preston  
Lancashire  
PR2 9PS

Tel: 01772 795676  
Email: office@longsands.lancsngfl.ac.uk

Acting Headteacher: Mrs. S McKeown

## APPLICATION FOR TERM TIME LEAVE

I wish to apply for leave of absence from school to be granted to:

Name of Child: ..... Class: .....

Dates of proposed absence:

From: ..... To: .....

Reason for Proposed Exceptional circumstances:

.....  
.....  
.....  
.....

Total Days Requested: .....

Parent/Carer Full Name(s) ..... Date of Birth .....

Parent/Carer Full Name(s) ..... Date of Birth .....

Address: .....

Signature of Parent/Carer: .....

Signature of Parent/Carer: .....

**Consequences for parents taking children on holiday in term time which are not authorised by school MAY result in a Penalty Notice of £120 per parent, per child being issued by the Local Authority.**

### FOR SCHOOL USE ONLY

Attendance % \_\_\_\_\_

Interview Offered to Parent/Carer? Yes / No Date: \_\_\_\_\_

Authorised? Yes/No \_\_\_\_\_ Headteacher Date: \_\_\_\_\_

Parent informed by letter / text? Yes / No Date: \_\_\_\_\_