

MILTON KEYNES COUNCIL

HOLMWOOD SCHOOL

Application for Leave of Absence

I request that _____ (Name of Child)

be granted leave of absence as follows:

Away from School from: _____

Returns to School on: _____

Number of days in total absent: _____

in order to take part in:

- family holiday
- religious festival
- other _____

(signature of Parent/Guardian)

Date _____

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ADMINISTRATION

Permission given _____ Date _____

Recorded in register _____

Recorded on database _____

Copy to class teacher _____