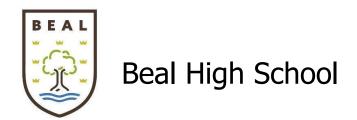
Beal High School Woodford Bridge Road,



Ilford, Essex, IG4 5LP Tel: 020 8551 4954

Email: admin@bealhighschool.co.uk

www.bealhighschool.co.uk

APPLICATION FOR EXCEPTIONAL LEAVE OF ABSENCE

Pupils attend school for a maximum 190 days each academic year. Full attendance is vital for your child's educational progress. The school regards absences as a very serious concern and there is an overwhelming connection between those students who are frequently absent and those who go on to underachieve in examinations.

Leave taken without permission of the Co-headteachers will be recorded as unauthorised. Requests for holidays in term time will not be authorised. If the absence is not authorised and the holiday is taken anyway, the case will be referred to the Education Welfare Service Redbridge who will issue a Penalty Notice to each parent for each child taken out of school of £80 if paid within 21 days. If not paid within 21 days, then this will increase to £160. Extended leave may result in your child being removed from the school roll.

The Co-headteachers will only grant leave in term time in the **most exceptional circumstances** but this must be requested in advance and agreement to each request is at the discretion of the Co-headteachers. Parents who consider that their particular circumstances are genuinely exceptional, and who wish to apply for leave, should complete Section A below and return to the Attendance Officer (studentabsence@bealhighschool.co.uk).

Section A

PUPIL'S NAME: (Please print clearly)				
Date of birth:		Form Group:		
Name of Parent/Guardian:				
Address:				
Home Telephone No:		Mobile No:		
Work No:		Email address:		
Reason for Absence (Should the reason for your absence entail you taking the student abroad, please note that outward and inward bound tickets must be produced when the letter is submitted for consideration):				
Date of Absence: From:	То:	Inclusive:		
Declaration: In submitting this application, I understand that the school's decision is final and that I will abide by it.				
Signed: (Parent/Guardian) Date:				

Section B (this section will be completed by the school and you will be notified about the decision in writing)

Student's Attendance to date:		Any Previous unauthorised leave: Yes/No	
HOY Comment and recommen	ded action:	VP Comment and recommended action:	
Co-headteacher's decision and			
☐ Unauthorised with PN	l .		
☐ Unauthorised no PN			
Authorised by	days (please specify number of days)		
Child to be removed from scho	ol roll:	YES/NO	
ure of Co-headteacher:		Date:	