

EXCEPTIONAL ABSENCE REQUEST FORM 2025-2026

This request must be submitted at least two weeks before the absence (unless in the case of an emergency)

Name of child:	
Class:	
First date of absence:	
Child returns to school on:	
Total number of school days requested:	
Reason for absence:	
To be completed by the school:	
Date (& time) form submitted: _____	
Child's attendance level for last three years:	
2025-26 (current year so far)	%
2024-25	%
2023-24	%
Any other exceptional absence requests made over the previous three years:	

Details (if applicable)	

Absence agreed by Karen: YES/NO	
Parents informed by letter / email / telephone	
Date _____	Signature _____

