



Diocese of Northampton  
St Louis Catholic Primary School  
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### LEAVE OF ABSENCE REQUEST

**PLEASE NOTE THAT PARENTS ARE EXPECTED TO TAKE  
FAMILY HOLIDAYS DURING THE SCHOOL HOLIDAYS**

Proposed Dates of Absence From: \_\_\_\_\_ To: \_\_\_\_\_

I request permission from the school's Governing Body for my child:

Name: \_\_\_\_\_ Class: \_\_\_\_\_

to be granted Leave of Absence for the above dates.

***Please give details and reasons for the proposed absence, including any extenuating circumstances that you feel should be taken into account:***

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

The completed form should be submitted to the Head Teacher **not less than one month before the proposed period of absence.**

