



**ST ANDREW'S CE (VA) JUNIOR SCHOOL**  
**MEDICAL ABSENCE FORM**

*Please complete this form and return to the school office*

- **Permission for absence MUST be requested from the Headteacher IN ADVANCE**
- **Parents should avoid booking medical/ dental appointments during school hours**

Taking a child out of school interrupts teaching and learning and can disrupt your child's educational progress. The law states that you do not have the right to take your child out of school during term time.

**The Education Pupil Registration England Amendment Regulations 2013 came into force on 1<sup>st</sup> September 2013 stating that Headteachers cannot grant leave of absence during term time unless there are exceptional circumstances.**

Child's name .....Class .....

Last day in school .....collect at (time) ..... returning to school on .....

Type of Appointment.....Time of Appointment.....

Reason.....

Signature of Parent / Carer..... date .....

Authorised / Unauthorised

*(Copy for classteacher)*

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**ST ANDREW'S CE (VA) JUNIOR SCHOOL**

To the Parent / Carer of:-

**Child's name** \_\_\_\_\_ **Class** \_\_\_\_\_

I have received the request for your child to be absent from school for \_\_\_\_\_ days ( \_\_\_\_\_ sessions)

Last day in school \_\_\_\_\_ returning on \_\_\_\_\_

I can confirm that:

- Permission is granted for your child to be absent – authorised absence.
- Permission is **not** granted for your child to be absent.

**Please note that where permission is not granted for your child to be absent and you take your child out of school this will be treated as an unauthorised absence. Unauthorised absences may lead to a Penalty Notice of £60 to £120 being issued against you.**

**Mrs K Smith**  
Head Teacher