



WESTMOOR PRIMARY SCHOOL

PUPIL LEAVE OF ABSENCE

PLEASE COMPLETE THE FORM IN BLOCK CAPITALS

Child's Details:

Child's First Name		Child's last name	
Child's current permanent address			
Postcode			

Reason for Leave

Type of leave: Religious Sporting Event Family Holiday Other

Leave for _____ **school days.**

Date of Leave

From _____ To _____

Signature of Parent(s)/Carer(s)

Name _____ Signed _____

Today's Date _____

OFFICE USE:

This form is for school use only and you will not receive a response. No holidays are authorised.

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