

## ST TEILO'S CATHOLIC SCHOOL Request to take child out of school during term time

Child's Name:		Date of Birth:
Your group/Class: Class teacher		
Contact Details (Address and mobile telephone Number)		
Date of the proposed tr	ip : -	
Length and purpose of	the absence:	
Duration of the absence	e and its impact on continuity of learning:	
Circumstances of the fa	amily and the wishes of parents:	
The date the pupil will r	return to school:	
UK contact details: (name, address and control not return on the stated	ontact number of a relative or friend who we ca d date)	an make contact with if you do

The overall % attendance pattern of the child :				
Leave : Authorised / Unauthori	sed			
Signature of Headteacher:				
Date :				
Home School Contract				
Absences in Term Time				
At St Teilo's School a panel is held to discuss absences taken during term time to decide whether they will be authorised or unauthorised. Each request is looked at and considered on an individual basis.				
If, however, there is extended absence, then the parent/s or guardian/s will discuss with the school about taking work to ensure that the child keeps up with their education during the absence.				
If the pupil/s do/does not return by the agreed date they are at risk of losing their school place/s and they will be removed from the school register in accordance with the admission guidance Education (Pupil Registration) (Wales) Regulations 2010 section 4 which states 'the pupils has ceased to attend the school and no longer resides within a reasonable distance from the school'.				
Failure to return on the agreed date will prompt welfare concerns; a child who goes missing from education may be considered to be at risk of significant harm. Any such concerns will immediately be referred to the statutory authorities for consideration.				
Signed:Pa	rent or Guardian	Date:		
Signed:He	ead teacher	Date:		