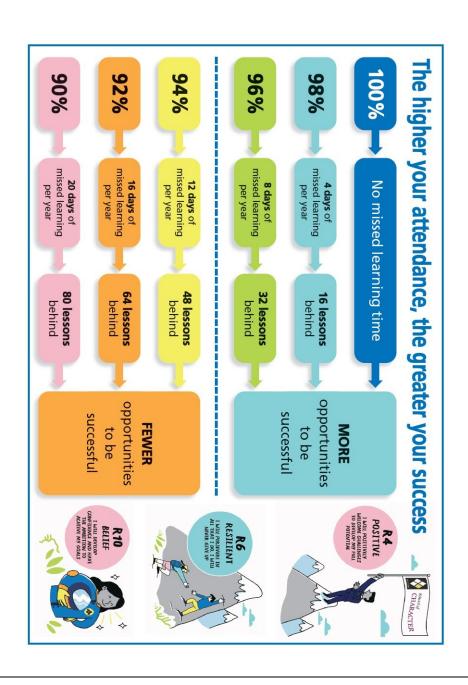
Exceptional circumstances for seeking absence during school time continued:





- Please hand this form into Reception.
- If in an envelope, please write on it REQUEST FOR ABSENCE FROM LEARNING.

REQUEST FOR CONSIDERATION OF AU-THORISATION OF ABSENCE FROM LEARNING DURING SCHOOL TIME.



The Regis School

Westloats Lane, Bognor Regis
West Sussex PO21 5LH
t 01243 871010 f 01243 871011
e enquiries@theregisschool.co.uk
w www.theregisschool.co.uk

Article 28 UNCRC: Every child has a right to an education.



REQUEST FOR AUTHORISATION OF ABSENCE FROM LEARNING DURING TERM TIME

Before you make this application for absence from school please note the following

- In most circumstances your request will not be authorised in term time unless there
 are EXCEPTIONAL CIRCUMSTANCES.
- When a pupil has accrued 10 recorded unauthorised absences in a 10 week period a
 referral can be submitted. This includes holidays taken in term time without the agreement of the school (G Code), arrived late to school after register has closed (U) code,
 any absence marked in the register as unauthorised (O).
- Parents/carers were informed of the change to the Education Welfare Service's policy regarding Fixed Penalty Notices in July 2024 and changes to the Government expectations from 19th August 2024.
- 4. Medical evidence of any GP, dental, hospital or other appointments MUST be shown and notice given in advance of the appointment unless an emergency appointment is made. Email attendancedesk@theregisschool.co.uk

Morning Register closes at 9am

Afternoon register closes at 2.15pm

Please ensure if your child has a medical appointment they are in school before the appointment and return after. Students late to school will receive a M code as authorised

FOR SCHOOL USE ONLY: Use Absence code C G U J1 M O P R T V W

Parent / Carer Please tick below and bring evidence	School Only to complete	FPN:	Υ	N
Medical Appointment	Dates and Times			
Dental Appointment	Evidence Seen			
Holiday	Number of days:			
Other	WSAL Approval			

REQUEST FOR AUTHORISATION OF ABSENCE FROM LEARNING DURING TERM TIME

TO: THE REGIS	SCHOOL					
Name of Student	:					
Mentor Group:	Year Group:	House:				
Current Attendan	nce:					
Names of brothers/sisters and the school they attend:						
Name:		School:				
Name:		School:				
Name:		School:				
First date of absence:	\boldsymbol{J}					
Total number of school days of absence being requested:						
-	mstances for seeking absence is to why this absence from learning will not be authorised.	ce during school time: cannot be taken in the 175 non-school days must Please continue over	rleaf:			
Parent/Carer		Date:				