



### Application for Exceptional Leave

STUDENT DETAILS	
Name:	Tutor Group:
Address:	Tel No:
Proposed Destination:	
First Date of Absence:	Last Date of Absence:
Return Date to School:	
Reason for Request:	
Any Supporting Information or Migrating Circumstances:	

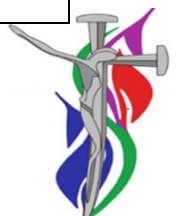
**IMPORTANT:** If your child is ill whilst away from school, or he/she returns to the UK feeling unwell, it is essential that your child is examined by your local GP. A medical note confirming the child is suffering from any infections or contagious illnesses and is fit to attend school **MUST** be received by the school before they return.

- I agree to the conditions outlined in this document
- I understand that it is my responsibility to ensure my son/daughter makes up any missed work in his/her own time upon their return to school
- I have read the schools extended authorised absent policy

Signed:

Print Name:

Date:





# CARDINAL NEWMAN CATHOLIC SCHOOL

Sandpits Lane, Keresley, Coventry, CV6 2FR  
[admin@cncs.school](mailto:admin@cncs.school)  
[www.cncs.school](http://www.cncs.school)  
T:02476 332382

To be completed by the school:

Application for Exceptional Leave continued:

Current Attendance	
Authorised:	
Unauthorised:	
Level of Fine:	
No Fine:	
Head Teachers Signature	
Date:	





# CARDINAL NEWMAN CATHOLIC SCHOOL

Sandpits Lane, Keresley, Coventry, CV6 2FR  
[admin@cncs.school](mailto:admin@cncs.school)  
[www.cncs.school](http://www.cncs.school)  
T:02476 332382

