



**Hove Park School**  
"Together We Achieve"

Nevill Campus: Nevill Rd, Hove, East Sussex, BN3 7BN  
Tel: +44 (0)1273 295000/1 Fax: +44 (0)1273 295009

Valley Campus: Hangleton Way, Hove, East Sussex, BN3 8AA  
Tel: +44 (0)1273 295002/3 Fax: +44 (0)1273 294994

Email: [office@hovepark.org.uk](mailto:office@hovepark.org.uk)

Mr Jim Roberts- Headteacher

## REQUEST FOR LEAVE OF ABSENCE IN TERM TIME

Before completing this form in full we direct you to our Attendance Policy. We are only able to authorise absence from learning in exceptional circumstances.

Student Name ..... Year.....

Parent/Carer name .....

Home Address.....

First day of absence..... Last day of absence .....

Total number of school days missed. ....

Exceptional circumstances are as follows:

**I understand that if this absence request is unauthorised and my child is not in school for the dates requested that I will be liable for a fixed penalty notice (£60 per parent per child which increases to £120 per parent per child if not paid within 21 days). I understand that if I do not pay this fine it could result in prosecution under section 444 of the Education Act 1996.**

Name of Parent/Carer making application.....

Signed..... Dated.....

**Please return completed form to the school marked for the attention of your child's Head of Year.**

Whole  
Education  
Partner School



Distinguished  
School



[www.hovepark.org.uk](http://www.hovepark.org.uk)