## 

## Shetland Islands Council

# Education and Social Care Department, Schools Service

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| **Dunrossness Primary School**  **Dunrossness** Shetland **ZE2 9JG**  **Head Teacher: Ms Andrea Henderson** | **Telephone: 01595 745440**  **Fax: 01950 460803**  **E-mail:** [**dunrossness@shetland.gov.uk**](mailto:dunrossness@shetland.gov.uk) Website: [www.dunrossness.shetland.sch.uk](http://www.dunrossness.shetland.sch.uk)Dunrossness School Logo |

**Application for Leave of Absence**

It is important that we have full information as to exact date, time and reason for absence. We would encourage you, as a parent, to ensure that your child is not absent from school any longer than is necessary.

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| **Name of Pupil(s)** | |  | | | |
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|  | |  | | | |
| **Class(es)** | |  | | | |
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| **DATE(S) OF PROPOSED ABSENCE FROM SCHOOL** | | | | |  |
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| **TIME OF DEPARTURE FROM SCHOOL** | | | |  | |
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| **DATE AND TIME OF RETURN** | | |  | | |
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| **FULL DETAILS OF REASON FOR ABSENCE** | | | |  | |
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| **SIGNED** | **(Parent/Guardian)** | | | | |

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| For Office Use Only: | □ | A | Other Authorised Absence | Headteacher’s Initials: \_\_\_\_\_\_ |  |
|  | □ | E | Authorised Parental Holiday |  |  |
|  | □ | G | Unauthorised Parental Holiday | Date: |  |
|  | □ | O | Other Attendance out of School |  |  |
|  | □ | Z | Extended Leave with Parental Consent |  |  |

**Please return this form to the school office**