

**REQUEST FOR TERM TIME STUDENT LEAVE LINKED TO OPERATIONS – ANNEX B**

Name of child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ House: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to request permission for my child to take ‘exceptional leave’ from school during term time due to my pre-operational leave/R&R/post operational leave (delete as required). I understand that any term time leave for children is discouraged and may be detrimental to my child’s education.

|  |
| --- |
| Reason for request: |

I understand that the maximum number of days linked to any one tour is 5 days. I also understand that the Head of household application must be pre-signed by my unit, in the box below, confirming that I am entitled to apply. I understand that actual permission for this exceptional term time leave from school can only be granted by the Principal.

|  |
| --- |
| UNIT DECLARATION  Name of Unit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Rank/Name of Unit representative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  This is to certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is entitled to apply for ‘exceptional leave’ for their child from school as a result of operational commitments/pre-operational leave/R&R/post operational leave (delete as required).  Signature of Unit representative \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Unit Stamp |

The exceptional leave I am requesting for my child is planned from (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ resulting in a total absence of \_\_\_\_\_\_\_\_\_\_\_\_ school days.

Signature of parent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Principal’s use only*

Thank you for your application for ‘exceptional leave’ for your child where the current attendance record stands at:

\_\_\_\_\_\_\_ % attendance representing \_\_\_\_\_\_\_ number of sessions missed.

a) I confirm that this exceptional leave has been agreed:

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) Your request for exceptional leave has not been agreed for the following reason:

|  |
| --- |
|  |

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_