

EXCEPTIONAL CIRCUMSTANCE APPLICATION FORM

SCHOOL..... DATE APPLICATION

NAME OF CHILD..... DOB.....

START DATE RETURN DATE.....

PARENT NAME Mr/Mrs/Ms.....

EXCEPTIONAL CIRCUMSTANCE

Please provide full details for the reasons for this request. (Please attach additional information if required)

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Please note under the government’s new guide lines it is at the Heads discretion as to whether this request is accepted or declined.
If granted and your child does not return to school on the stated date the school can remove your child off the school roll and you will be required to make a new application to the Local Authority for a school place.
Parents taking their child out of school where the request has been declined leave themselves at risk of a Penalty notice and/or Prosecution

Parents Signature Date.....

Accepted DATE

Declined DATE.....

Head/ Principal