



ROSE HILL SCHOOL

Coniston Avenue, Tunbridge Wells, Kent TN4 9SY
Tel: 01892 525591 Fax: 01892 533312
e-mail: office@rosehillschool.co.uk
www.rosehillschool.co.uk

REQUEST FOR ABSENCE DURING TERM TIME

- ❖ *Whenever possible, holidays should be taken during school holidays and avoiding times when children are taking exams or tests.*
- ❖ *The duration of the absence and the date of return should be agreed by the school before making any arrangements.*
- ❖ *Absences interrupt the learning process and, therefore, should be kept to a minimum.*
- ❖ *If total absence exceeds 10 days during the academic year (within term times), this must be considered as unauthorised absence.*

<i>Child's Name:</i>		<i>Form:</i>
<i>First date of absence:</i>	<i>Last date of absence:</i>	<i>Total number of days:</i>
<i>Reason for absence:</i>		
<i>Signature of parent/guardian:</i>		<i>Date:</i>

Please return form to: *Ann Green, Headmaster's Secretary, Rose Hill School,
Coniston Avenue, Tunbridge Wells, Kent, TN4 9SG
(This portion to be retained by the School)*

✂ _____

ACKNOWLEDGEMENT FROM THE HEADMASTER:

*Thank you for your request for absence and, under the circumstances, I confirm **AUTHORISED ABSENCE** for:*

Name of child/children _____ *Class:* _____

Absence from School approved from _____ *to:* _____

I will inform his/her/their teacher(s) accordingly.

Signed: _____ *(Headmaster)* *Date:* _____

(This portion to be returned to parent)