



MOUNT HOUSE
SCHOOL

STUDENT ABSENCE REQUEST FORM

Pupil(s) Name:	Form:

I request permission for my son/daughter(s) to be absent from school on the following days:

From

To

Total number of school days absent

Reason for Absence:

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Signed (Parent/Guardian):

Date:

Please hand this form to the Deputy Head - Pastoral.

This absence request has been

AUTHORISED / NOT AUTHORISED

Signed (Deputy Head - Pastoral):

Date:

Once this form has been completed please return to
Mrs S Linsey-Mitellas (PA to Principal)

Admin Note: Please input into isams once complete