



Pupil Medical Appointment Leave of Absence

Full Name of Child(ren) _____

Class _____

Date _____ Time from _____ to _____

Reason for absence

Signature of Parent/Carer _____

Date _____

To be completed by the school

Appointment card/letter/text seen YES NO

Seen by: _____ Signed: _____

Date _____

Parents should make every effort to make routine appointments (e.g. doctors' or dentist' appointments) outside of school hours. Absence for appointments in school hours will not be authorised, unless 48 hours' notice is given to the school using the correct forms. All hospital, GP and dental appointments will require an appointment card/letter/text and need to be booked in at the school office, in some cases children will not be released without the supporting documentation.