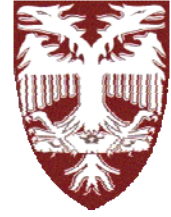




St Ambrose Barlow R C High School



REQUEST FOR HOLIDAY ABSENCE OUTSIDE SCHOOL HOLIDAY CALENDAR

The school will not authorise holidays during term time

To: The Headteacher
St Ambrose Barlow R C High School
Shaftesbury Road
Swinton
M27 5SZ

From: _____ (Please insert your name, address and
telephone number)

Child's Name _____ Form _____

I wish to advise you that I will be taking my child _____ on holiday
outside the normal school holiday calendar.

Reason _____

Dates of absence: _____

I am aware that the school cannot give permission for ANY holiday outside the
normal school calendar. Education Welfare Officers will be advised of holiday
absence outside the normal school holiday calendar.

Signed _____ (Parent/Guardian)

Date _____