



Charlton Kings Kindergarten

Lyefield Road East, Charlton Kings, Cheltenham, GL53 8AY

Telephone: (01242) 514483

email: secretary@ckis.org.uk Kindergarten@ckis.org.uk



NOTIFICATION OF LEAVE OF ABSENCE DURING TERM TIME

Child's name			
Child's address			
Date of first day of absence		Date of return to Kindergarten	
Number of days that your child will be absent from Kindergarten			

Please give details for your child's absence from Kindergarten:

Name(s) of Parent/Carers making the notification					
Title		Forename		Surname	
Address					
Signed				Date	
Name(s) of Parent/Carers making the notification					
Title		Forename		Surname	
Address					
Signed				Date	

Please note that regular non-attendance can have an impact on your child's funding.

Gloucestershire County Council are required to be informed of any regular patterns of non-attendance and funding may be reviewed for the following funded period.



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NOTIFICATION OF LEAVE OF ABSENCE DURING TERM TIME KINDERGARTEN RESPONSE

This response must be sent to each parent/ carer and a copy retained by Kindergarten.

Dear	
Child's name	

Thank you for your notification of your child's planned absence from
___/___/_____ to ___/___/_____ (totalling ___ days).

Your child's attendance is currently _____%

Please note that absence can have an impact on your child's funding.

Signed: _____ (Kindergarten Lead Practitioner)

Print Name: _____ Date: ___/___/___

Signed: _____ (Head teacher)

Print Name: _____ Date: ___/___/___