INTERNATIONAL SCHOOL ALMERE

Application request extraordinary leave

The completed form must be submitted at least six weeks in advance to allow the school sufficient time to process the request.
Please note: For requests for 10 consecutive days or longer, parents/guardians are required to apply directly to the Truancy Officer in the municipality where the family resides.

The undersigned (father, mother, guardian) requests permission for extraordinary leave: (one form per student, in case of siblings)

Name student: _____ Class: _____

Date of Birth: _____

From _____ to _____

The reason for this request:

_____

_____

_____

_____

Name applicant: _____ Relationship to student: _____

Telephone: _____ Email: _____ (for reply)

Date: _____ Signature: _____

Kindly indicate if this leave request also pertains to another student? Yes / No

If Yes, is the student from the: Primary Section / Secondary Section

Name student: _____ Class: _____

For office use only

Programme Coordinator: Supports / Does not support Signature: _____

Reason:

_____

_____

_____

_____

Confirmation Head of School: Is allowed / Is not allowed Signature: _____

Motivation:

_____

_____

_____