

ENRICHMENT WEEK – LEAVE OF ABSENCE REQUEST

PUPIL NAME	
TUTOR GROUP	
CURRENT ATTENDANCE (GO4 SCHOOLS)	% (minimum attendance must be 92% unless medical evidence)
PROPOSED ENRICHMENT DESTINATION	
PROPOSED ENRICHMENT TRIP DATES	
PURPOSE OF ENRICHMENT TRIP (please circle)	<ul style="list-style-type: none"> • SPIRITUAL • MORAL • SOCIAL • CULTURAL
PROPOSED ENRICHMENT ACTIVITIES (please circle)	<ul style="list-style-type: none"> • MUSEUM • RELIGIOUS BUILDING • EDUCATIONAL INSTITUTION • FOREIGN LANGUAGE VISIT • GAIN A QUALIFICATION • OTHER (PLEASE STATE)
ADULTS SUPERVISING TRIP (RELATIONSHIP TO PUPIL)	

SIGNED:-

DATE:-.....

I understand that by signing this I undertake to ensure my child enriches their education by completing the 'Enrichment Booklet'.

AUTHORISED SCHOOL SIGNATURE:-

DATE:-