



BEVERLEY J6TH FORM

AUTHORISED ABSENCE FORM

SURNAME: _____ FIRST NAME: _____

FORM: _____ ARE YOU A BURSARY STUDENT? YES NO

PERIOD OF ABSENCE

Total number of days/periods absent _____

From date: _____ To date: _____

REASON FOR ABSENCE:

I declare that the information given is true and understand that this form will be used to compile records of absence for reviews and (where applicable) establish my entitlement to Bursary payments. A false statement may lead to a Bursary payment being stopped.

STUDENT SIGNATURE: _____

DATE: _____

EVIDENCE RECEIVED: YES NO

APPROVED

REJECTED

