



Pupil Leave for Medical Appointment Request

Wherever possible, this form should be submitted to the school office at least 48 hours in advance of appointment with an appointment letter / card attached.

Pupils Name Year

Date of Appointment

Time of Appointment

Time pupil will be collected from school

Will the pupil return to school after the appointment? Yes ☐ No ☐

Parent / Guardian Signature Date

Please Note - All medical appointments should be made outside of school hours where possible.

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For Office Use

Date Received
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Copy of appointment received ☐

Added to Arbor ☐

Signed
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