

Seghill First School

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Headteacher: Miss T Chappell

**T Together
E Everyone
A Achieves
M More**



Permission for children to be absent from school to attend a medical/dental appointment

Parents and carers are asked to arrange appointments (routine medical, dental check ups) outside of school hours. If your child has to attend an essential appointment during school hours, please complete this form and bring it to the school office with a copy of the appointment letter.

Child's name _____ Class _____

My child has to attend a medical/dental/other appointment on

_____ (date) at _____ (time)

at _____ (location).

Please complete **one** of the options below-

☐ I will collect my child from school on _____ (date)
at _____ (time) to attend the appointment above OR

☐ I will bring my child to school following the appointment above on
_____ (date) at _____ (time) OR

☐ My child will be absent for the whole day on _____ (date)
to attend the appointment above.

Signed _____ Date _____

Please return this form to the school office with a copy of the appointment letter.