



APPLICATION FORM VACATION LEAVE
(LPW art. 11f)

TO BE FILLED OUT BY PARENT/GUARDIAN
(maximum 10 days per school year)

1. Student details

Full name: _____ **Date of birth:** _____
Address: _____ **BSN:** _____
Postal code/Place: _____ **Class:** _____

2. Contact details parent/guardian

Name: _____
Relation to the child: father - mother - guardian
Address (in case different): _____
Telephone number: _____

3. Details of sibling(s) enrolled in other schools:

Name: _____ **Date of birth:** _____
School: _____

Name: _____ **Date of birth:** _____
School: _____

4. Nature of profession for which vacation leave outside school holidays is requested:

(add evidence)

5. Period of leave:

The undersigned declares that due to the specific nature of his/her profession, he/she cannot go on holiday with his/her above-mentioned child(ren) during the fixed school holidays.

For this reason, he/she would like to go on vacation leave with above mentioned child(ren) from _____ until _____

He/she requests an exemption from regular school visits.

6. Signature parent/guardian

Place:

Date:

TO BE FILLED OUT BY EDUCATIONAL MANAGER

7. *Het verlof wordt wel / niet verleend.*

Reden waarom het verlof niet wordt verleend:

(Informeer bij de scholen van de andere leerlingen uit het gezin of verlof wel/niet wordt verleend)

(Verlofaanvragen van meer dan 10 dagen zijn niet mogelijk!)

8. *Handtekening manager onderwijs:*

Veldhoven,

Fully completed document needs to be sent to the responsible Education Manager for approval.

Year 1: ijacobs@sondervick.nl

Year 2: dverus@sondervick.nl