

## **High School for Girls**

## **Leave for Medical Appointments**

**All Appointments for Doctors or Dentist should be made outside of school time.** For Hospital or orthodontic appointment please provide details below and attach a copy of the appointment letter or card to this form.

If Appointment made by phone please circle: Hospital/Orthodontist Name of Student: Form: DATE OF APPOINTMENT: To be collected from school TIME: Time of return to school: \_\_\_\_\_ I will collect my daughter from Main Reception: Signature of Parent/Carer: \_\_\_\_\_\_ Name of Parent/Carer: The school operates Safeguarding procedures and takes its responsibility of duty of care for students seriously. Therefore we would be grateful if parents/carers would abide by the procedures set for all students in the main school. All students in Years 7-11 MUST BE collected from THE MAIN RECEPTION by their parent/carer, or another adult contact on their student data sheet. Students should go to Student Services to sign out. Students will then go to the main reception when their parent/carer arrives. (Please do not write below this line) Leave has been approved: % Attendance Name of Student: \_\_\_\_\_ Form: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_