

International School of Bergen
Vilhelm Bjerknesvei 15
5081 Bergen



INTERNATIONAL
SCHOOL OF
BERGEN

Parent/guardian name:
Parent/guardian's e-mail address:
Date of application:

APPLICATION FOR LEAVE OF ABSENCE

Complete the information below, print, sign and either send or deliver to the school.

1. I wish to apply for a leave of absence for:
 - Name:
 - Grade:
 - Date of birth:
2. From and including: _____ Until and including: _____
 - Number of school days in total:
3. Reason for absence:
4. What range of strategies will be used to make sure that no school work is missed during the leave of absence?

Regards,

Parent/guardian's name and signature

Please note that ISB has to follow the Norwegian Education Act, Section 2-11

Leave of absence from compulsory education

When defensible, the municipality may upon receipt of an application grant individual pupils leave of absence for up to two weeks.

Pupils who belong to a religious community outside the Church of Norway have, upon application, the right to be absent from school on those days their religious community celebrates as holy. This right is conditional upon the parents ensuring necessary tuition during the period of leave, so that the pupil is able to keep pace with the ordinary teaching when the period of leave is at an end.

Please refer to the ISB Handbook for more information about planned absences.

Copies will be given to: homeroom teacher, Deputy Director, Director