

Parents' Application for Child's Sick Leave

1. Request for Child's Medical Leave Due to Flu Recovery Period

To, The Principal, [School Name], [School Address], [City], [Date]

Subject: Request for Child's Medical Leave Due to Flu Recovery Period

Respected Sir/Madam,

I am writing this application to inform you that my child, [Child's Name], a student of class [Child's Class] in your esteemed school, has been diagnosed with the flu. The doctor has advised a rest and recovery period of one week from [Starting Date] to [Ending Date].

I kindly request you to grant medical leave for my child during this period. As per the doctor's advice, it is essential for my child's health to take rest and recover before resuming school. I assure you that we will make sure [Child's Name] covers the missed lessons and remains up to date with the ongoing curriculum.

Please find the enclosed medical certificate from our family doctor for your reference. I request your understanding and approval for the medical leave of absence for the mentioned duration.

Thanking you in advance for your cooperation.

Yours sincerely,

[Your Name] [Your Contact Number] [Relationship with the Child (e.g., Father/Mother)] [Address]



2. Application for Unanticipated Allergic Reaction Sick Leave for Child

To, The Principal, [School Name], [School Address], [City], [Date]

Subject: Application for Unanticipated Allergic Reaction Sick Leave for Child

Respected Sir/Madam,

I am writing to inform you that my child, [Child's Name], a student of class [Class and Section], has had an unanticipated severe allergic reaction last night. Due to this sudden medical emergency, my child is unable to attend school today.

As per the doctor's advice, [Child's Name] needs to take prescribed medication and rest for proper recovery. Therefore, I kindly request you to grant a leave of absence for today, [Date], so that [Child's Name] can recuperate and return to school in good health.

I assure you that [Child's Name] will cover the missed lessons and assignments upon returning to school. I appreciate your understanding and cooperation in this matter.

Thank you.

Yours faithfully,

[Your Name] [Relationship with the child, e.g., Father/Mother] [Contact Details]



3. Child's Sick Leave Application for Mandatory Quarantine Measures

To, The Principal, [School Name], [School Address], [City], [Date]

Subject: Child's Sick Leave Application for Mandatory Quarantine Measures

Respected Sir/Madam,

I am writing to inform you that my child, [Child's Name], a student of class [Class and Section], is unable to attend school from [Date] to [Date] due to mandatory quarantine measures as per the government's guidelines. [Child's Name] has unfortunately been exposed to a COVID-19 positive patient and, though currently asymptomatic, has been advised to self-isolate and monitor their health for the next 14 days as a precautionary measure.

During this period, my child will not be able to attend school or any extracurricular activities. I request you to kindly grant [Child's Name] sick leave for the mentioned duration and share any essential study materials, assignments, or updates for the respective subjects.

Furthermore, upon completion of the quarantine period and ensuring that [Child's Name] exhibits no symptoms or health concerns, we will provide a medical fitness certificate from a registered medical practitioner before sending [Child's Name] back to school.

Your understanding and cooperation in this matter are highly appreciated. I apologize for any inconvenience this may cause and assure you that [Child's Name] will make every effort to catch up with the missed lessons and assignments.

Thank you for your attention to this matter. Please feel free to contact me at [Your Contact Number] or [Your Email Address] if any further information or clarification is required.



Yours sincerely,

[Your Name] [Parent/Guardian of Child's Name] [Contact Number] [Email Address]

4. Emergency Surgery Calls for Child's Urgent Medical Leave Request

To, The Principal, [School Name], [School Address], [City], [Date]

Subject: Emergency Surgery Calls for Child's Urgent Medical Leave Request

Respected Sir/Madam,

I am writing to inform you about my child, [Child's Name], a student of Class [Class and Section] in your esteemed school. Unfortunately, my child has been diagnosed with [Medical Condition], and the doctor has advised immediate surgery to treat the condition. The surgery has been scheduled for [Surgery Date].

In view of this unforeseen emergency, I kindly request you to grant [Child's Name] medical leave from [Start Date] to [End Date], amounting to [Number of Days] days. This will allow us to ensure proper medical treatment and post-surgery care for our child. I assure you that we will help [Child's Name] catch up with the missed classes and assignments during this period.

Kindly find the attached medical prescription and the doctor's letter for your reference. We deeply appreciate your understanding and support in this difficult situation, and we hope for a prompt recovery for our child.

Thanking you in advance.



Yours sincerely,

[Your Name] [Your Address] [City] [Contact Number] [Email Address]

5. Commendable Child's Sick Leave Application as a Precaution for Peer Health

To, The Principal, [School Name], [School Address], [City], [Date]

Subject: Sick Leave Application for my Child as a Precaution for Peer Health

Respected Sir/Madam,

I am writing to inform you that my child, [Child's Name], a student of class [Class] in your esteemed institution, is unwell and has been diagnosed with [Type of illness]. As a responsible parent, I am concerned about the health of other students and staff; hence, I have decided to keep my child at home as a precautionary measure to prevent the potential spread of the illness.

I kindly request you to grant [Child's Name] a sick leave for [Number of days] days, starting from [Start date] to [End date]. During this period, my child will be taking the prescribed medication and resting to recover as quickly as possible.

I assure you that [Child's Name] will make up for any missed assignments and lessons upon returning to school. I hope that you will understand our concern for the well-being of our child and his/her peers and grant the requested sick leave.

Thank you for your understanding and cooperation in this matter.



Yours sincerely,

[Your Name], [Your Address], [City], [Contact Number]