



Application for Exemption from Attendance at School

PART A: STUDENT DETAILS

Please complete the table below with details of all students:

FAMILY NAME	GIVEN NAME	DOB	AGE	GRADE	SRN

Student address: _____

Postcode: _____

School name: _____ Class/Year: _____

Dates of extended leave applied for: _____

Number of school days: _____

REASON FOR APPLICATION: Please tick

Exceptional Domestic Circumstances	
Other Exceptional Circumstances	
Direction under Section 42D of the <i>Public Health Act 1991</i>	
Employment in entertainment industry/participation in elite sporting event for short periods of time ie: for one or two days, and at short notice	

NOTE: Where the reason for application for exemption includes long term travel arrangements of more than 20 school days, copies of travel documentation should be included with the application.

PART A: DETAILS OF PRIOR EXEMPTIONS (if applicable)

Date of prior exemption/extended leave: From: ___/___/___ to ___/___/___

Number of school days: _____

Copy of Certification of Exemption/Extended Leave – Travel attached (Please tick) Yes No

PARENT DETAILS (Applicant)

Family name: _____ Given Name: _____

Address: _____ Postcode: _____

Telephone number: _____ Relationship to student: _____

As the parent and applicant, I hereby apply for a *Certificate of Extended Leave-Vacation/Travel* and understand my child will be granted a period of extended leave upon acceptance by the principal of the reason provided.

I understand that if the application is accepted:

- I am responsible for his/her supervision during the period of extended leave
- the exemption is limited to the period indicated
- the exemption is subject to the conditions listed on the *Certificate of Exemption*
- The exemption may be cancelled at any time

I declare the information provided in this application for a certificate of exemption is to the best of my knowledge and belief; accurate and complete. I recognise that should statements in this application later prove to be false or misleading any decision made as a result of this application may be reversed. I further recognise that a failure to comply with any condition set out in the exemption may result in the exemption being revoked.

Signature of parent: _____

Date: ___/___/___

Please return to school for consideration and approval