



APPLICATION FOR EXEMPTION FROM ATTENDANCE AT SCHOOL

Information provided in this form will be used in accordance with the Sydney Catholic Schools Privacy Policy

STUDENT DETAILS		
Surname:	Given Name:	H/R:
PARENT/CAREGIVERS DETAILS		
Surname:	Given Name:	
Relationship to student:		
Email Address:		
<i>Correspondence in response to this request for leave will be sent to your nominated email address</i>		
APPLICATION FOR EXEMPTION		
Dates of exemption applied for: from / / / to / / /		
Number of school days:		
Reason for Application for Exemption (<i>please tick relevant box</i>)		
Exceptional domestic circumstances	<input type="radio"/>	
Other exceptional circumstances	<input type="radio"/>	
Employment in entertainment industry/Participation in elite sporting event	<input type="radio"/>	
Please provide details about the reason for the Application for Exemption (attach any relevant documentation to this application, e.g. correspondence from carnival organisers, travel documents etc.)		
IMPORTANT INFORMATION		
SUBMISSION OF FORM		
A request for exemption from attendance should be submitted to the principal at least two weeks in advance of the proposed leave, except in *exceptional circumstances.		
ASSESSMENT TASKS		
When the proposed exemption from attendance coincides with assessment task(s) the applicant must adhere to the College Assessment Policy.		
EXPECTATIONS		
As outlined in the College Enrolment Form – <i>Punctuality and regular attendance at the College and all lessons are essential. Attendance at times prescribed by the College is expected.</i>		
PROCEDURE FOR DECISION		
A review of a boy's attendance record, participation in College events, progress in his studies, and a fee account status will be undertaken by the Principal prior to any decision on the exemption from attendance request.		
*At the discretion of the Principal.		

Please turn over

DECLARATION / SIGNATURE

As the parent/caregiver of the above-mentioned student, I hereby apply for Exemption from Attendance at School, under the Education Act 1990.

I understand that, if the exemption is granted:

- I am responsible for the supervision of the student during the Period of Exemption;
- the exemption is limited to the period indicated;
- the exemption may be cancelled at any time.

I declare that the information provided in this Application for an Exemption of Attendance 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 because 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/Caregiver: _____ Date: _____/_____/_____

**Please return the completed form to your son's Year Coordinator.
Once your application has been considered a response will be sent via email.**

OFFICE USE ONLY**YEAR COORDINATOR**

Year Coordinator Name:

Signature:

Has similar leave been taken since enrolment? <i>If yes, specify below in Comments section.</i>	YES <input type="radio"/>	NO <input type="radio"/>
Have you checked event/itinerary details to confirm minimal time away from school? (e.g. Flight times, event start times)	YES <input type="radio"/>	NO <input type="radio"/>
Have you checked the assessment calendar for tasks?	YES <input type="radio"/>	NO <input type="radio"/>
Leave conditionally recommended?	YES <input type="radio"/>	NO <input type="radio"/>

Comment required:

OFFICE CONFIRMATION

Attendance History CHECKED

Comment:

Fee Account CHECKED

Comment:

ASSISTANT PRINCIPAL APPROVAL

Leave approved YES NO

Signature:

Date:

Comment:

{Exemption from Attendance Certificate} /
{Application Declined letter} issued:

YES

NO

Date: