



DE LA SALLE CATHOLIC COLLEGE CARINGBAH

APPLICATION FOR LEAVE FROM SCHOOL

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

STUDENT DETAILS		
Surname:	Name:	HR:
PARENT/CAREGIVER DETAILS		
Surname:	Name:	
Relationship to student:		
Email Address:		
<i>Correspondence in response to this request for leave will be sent to the above nominated email address</i>		
DATES REQUESTED		
First day and date of leave:	M	T W T F ____ / ____ / ____
Last day and date of leave:	M	T W T F ____ / ____ / ____
Number of school days absent:		
Please provide details for requesting this leave. For medical reasons please provide documentation.		
IMPORTANT INFORMATION		
SUBMISSION OF FORM - A request for leave is to be submitted to the College at least two (2) weeks in advance of the proposed leave, except in exceptional circumstances.*		
ASSESSMENT TASKS - When the proposed leave coincides with assessment tasks, scheduled assessment blocks or interruption free days, <i>leave will not be granted</i> unless there are exceptional circumstances.		
EXPECTATIONS - As outlined in the College Enrolment Form – <i>Punctuality and regular attendance at the College and all lessons is essential. Attendance at times prescribed by the College is expected.</i>		
PROCEDURE FOR DECISION - A review of the student's attendance record, participation in College events and progress in studies will be undertaken by the Assistant Principal prior to a decision on granting leave.		
<i>* At the discretion of the Principal</i>		

DECLARATION / SIGNATURE

As the parent and applicant, I hereby apply for extended leave and understand my son will be granted a period of leave upon acceptance by the Assistant Principal of the reason provided. I understand that:

- (1) As part of the implementation of the National Standards, holidays taken by students outside of school vacation periods will now be included as absences and no longer an exemption from attendance.
- (2) If the Principal or Assistant Principal does not accept the leave request for a student, the absence will be recorded as unjustified.
- (3) Exceptional domestic circumstances, **but not including participation in family holidays** during school term, will be considered subject to being satisfied that this is in the best educational interests of the child.
- (4) If the application is successful, I will be responsible for the supervision and learning of my son during the period of leave. Lesson material will not be provided by the College, however he will refer to Compass for classwork. The provided period of extended leave is limited to the period indicated on the request form.
- (5) When travel / leave period exceeds 50 days (10 weeks of a school term), access to Distance Education or enrolment in another school must be considered.
- (6) The period of extended leave will count towards my son's absences from school.

I declare the information provided in this application 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 regarding this application may be reversed.

Signature of Parent/Caregiver:		Date: ____ / ____ / ____
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Please return this completed form to the College Front Office.
Once your application has been considered, a response will be sent via email.