

APPLICATION FOR EXTENDED LEAVE OR EXEMPTION

- **Leave** – extended periods (10 – 100 days) not related to illness/sickness
- **Exemption** – regular (weekly/fortnightly) external therapy/medical appointments during school hours

Student Details

Family Name:

Given Name/s:

Date of Birth:

Age:

Class:

Address:

Leave/Exemption Details

Dates of leave/exemption:

From:

To:

Note: Any regular exemption arrangement will cease at the end of each school year. If required, a new application must be completed the subsequent year.

Regular Exemption Arrangements:

Select day/s, frequency and times that student will be absent from school.

Select Day(s):

☐

Mon

☐

Tues

☐

Wed

☐

Thurs

☐

Fri

Select Frequency:

☐

Weekly

☐

Fortnightly

☐

Monthly

☐

Other:

Select Time using the Timeline below:

Check time intervals that your child will be **absent from school**.

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9:00

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9:15

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9:30

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9:45

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10:00

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3:00

Reason for leave/exemption:

☐

Leave – extended periods (10-100 days) not related to illness/sickness

☐

Exemption – regular (weekly/fortnightly) external therapy/medical appointments during school hours

☐

Other Please provide reason:

 **Please attach any additional evidence to support the application**

Declaration by Parent/Guardian

As the Parent/Guardian of the above mentioned student, I am responsible for the student's supervision during the period of leave/exemption. I understand that the leave/exemption is limited to the period indicated. I declare the information provided in this is to the best of my knowledge and believe 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 leave/exemption may result in the arrangement being revoked.

Full Name of Parent/Guardian:

Relationship to Student:

Contact Number:

Signature:

Date:

Outcome completed by CEO/Principal (Office Use Only)

Principal Name:

Principal Signature:

Date:

☐

Exemption/Leave granted (leave recorded as "M")

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Exemption/Leave denied (absence recorded as "A". Unjustified)

☐

Leave granted (recorded as "L")

Leave periods are included in absence reporting

Principal comments:

NOTE: if the number of school days requested exceeds 100 or the total takes the student over 100 school days in a 12month period, further documentation will be forwarded to the Parent/Guardian for completion. This will then be provided to Association of Independent Schools NSW for review with the Department of Education's Delegate.