

Application for Exemption from Attendance at School

General

PART A (to be completed by caregiver)							
School Details							
School Name:							
Suburb:		Phone:					
Student Details							
Given Name/s		Surname					
Residential Address							
Suburb							
Postcode		Date of Birth					
Student Number		Age					
Application for Exemption							
Dates exemption applied for:							
From:		No. of School Days					
To:							
Reason for Application for Exemption (<i>please select relevant box</i>)							
<ul style="list-style-type: none"> • Exceptional domestic circumstances <input type="checkbox"/> • Other exceptional circumstances <input type="checkbox"/> • Employment in entertainment industry/participation in elite sporting event for short periods of time (ie. For one or two days at short notice) <input type="checkbox"/> 							
Please provide details of the reason for the application							
<div style="border-bottom: 1px dashed black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px dashed black; margin-bottom: 5px;"></div>							
Are there any prior or current exemptions?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, Dates of prior/current exemption	From		To				
Is copy of prior/current Certificate of Exemption attached?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Parent / Caregiver Details							
Given Name/s		Surname					
Residential Address							
Suburb		Postcode					
Phone		Relationship to Student					

Parent/Caregiver Declaration / Signature

As the parent/caregiver of the above mentioned student, I hereby apply for a Certificate of 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 is subject to the conditions listed on the Certificate of Exemption;
- the exemption may be cancelled at any time.

I declare that 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

Date

Once you have completed and signed Part A, please return this form to the school principal.

Privacy Statement

The information provided will be used to process the student's Application for an Exemption from the requirement to enrol at and/or attend school. It will only be disclosed for the following purposes

- General student administration relating to the education and welfare of the student;
- Communication with students and parents;
- To ensure the health, safety and welfare of student, staff and visitors to the school;
- State and national reporting purposes;
- For any other purpose required by law.

The information will be stored securely.

You may access or correct any personal information by contacting the school.

If you have any concerns or complaints about the way your personal information has been collected, used or disclosed, please contact the school

Part B (to be completed by the principal)

Principal's Recommendation and Signature

If Application is supported and the leave is under 100 school days, the principal completes a *B6 Form Certificate of Exemption from Attendance at School* and issues to the parent. If the leave application is for more than 100 school days the principal makes a recommendation and forwards it to the Catholic Schools Office.

I recommend that a Certificate of Exemption be:

Supported



Declined



Details for recommendation not to be supported

Name of School

Town

Principal Name

Phone

Email

Signature

Date

Part D (to be completed by the investigating officer nominated by the Diocese)

Investigating Officer's Details

I recommend that a Certificate of Exemption be:	Granted	<input type="checkbox"/>	Declined	<input type="checkbox"/>
---	---------	--------------------------	----------	--------------------------

Details of recommendation not to grant a Certificate of Exemption

Name		Position	
Phone		Email	
Investigating Officer's Signature		Date	

Part E (to be completed by the Director)

Director's Decision

Application for Exemption:	Granted	<input type="checkbox"/>	Declined	<input type="checkbox"/>
----------------------------	---------	--------------------------	----------	--------------------------

(If Granted Complete form B6 – Certificate of Exemption from Attendance at School)

Details for Declined Application for Certificate of Exemption

Name of delegate			
Position			
Signature		Date	

CSO Issues Certificate of Exemption from Attendance at School (Form B6)