

## Application for Exemption from Attendance at School (M)

### PART A

*To be completed by parent/caregiver; if exemption is sought for more than one student, separate applications need to be made*

#### SCHOOL DETAILS

Name/Suburb ..... Telephone No .....

#### STUDENT DETAILS

Family Name ..... Given Name(s) .....

Address ..... Postcode .....

Date of Birth ..... Age ..... Student No. ....

#### APPLICATION FOR EXEMPTION

Dates of exemption applied for .... / .... / .... to .... / .... / .... Number of school days .....

If non-consecutive dates – individual dates applied for: .....

Total number of school days .....

#### REASON FOR APPLICATION FOR EXEMPTION (please tick relevant box)

- Exceptional domestic circumstances ☐
- Other exceptional circumstance ☐
- Employment in entertainment industry/participation in elite sporting event for short periods of time (i.e. for one or two days and at short notice) ☐

Please provide more details about the reasons for the Application for Exemption. The name of the accredited elite program and/or a schedule of training or tour itinerary from the arts/sporting body (e.g. Australian Institute of Sport) must be attached with contact names and numbers.

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## DETAILS OF PRIOR/CURRENT EXEMPTIONS

Date of exemption from: .... / .... / .... to .... / .... / ....

Number of school days .....

Is copy of prior/current Certificate of Exemption attached?

Yes ☐ No ☐

Cont'd

## PARENT/CAREGIVER DETAILS

Family name ..... Given name(s) .....

Address ..... Postcode .....

Contact telephone ..... Relationship to student .....

## DECLARATION/SIGNATURE

As the parent or 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 his/her supervision 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 information provided in this Application for a Certificate of Exemption from Attendance at School 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 applicant/s ..... Date .....

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

## PRIVACY STATEMENT

The information that you provide 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 students, 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 a concern or complaint about the way your personal information has been collected, used, or disclosed, you should contact the school.

## PART B

### PRINCIPAL'S DECISION AND SIGNATURE

#### Application for Exemption of LESS THAN 50 days

Granted ☐ (Complete Certificate of Exemption from Attendance at School)

Declined ☐ Details .....

Principal's name ..... Telephone .....

Signature..... Date .....

### PRINCIPAL'S RECOMMENDATION AND SIGNATURE

#### If application is for exemption of 50 DAYS OR MORE the principal makes a recommendation and forwards it to the Catholic Schools Office.

Granted ☐ (Complete Certificate of Exemption from Attendance at School)

Declined ☐ Details .....

Principal's name ..... Telephone .....

Signature..... Date .....

### INVESTIGATING OFFICER'S RECOMMENDATION AND SIGNATURE

#### Application for Exemption of 50 DAYS OR MORE

Granted ☐ (Complete Certificate of Exemption from Attendance at School)

Declined ☐ Details .....

Officer's name ..... Telephone .....

Signature..... Date .....

### MINISTER'S DECISION (to be completed and signed by the delegate)

#### Application for Exemption of 50 DAYS OR MORE

Granted ☐ (Complete Certificate of Exemption from Attendance at School)

Declined ☐ Details .....

Delegate's name ..... Telephone .....

Signature..... Date .....

Principal completes Certificate of Exemption from Attendance at School if exemption is granted.