



Application for Exemption from Attendance at School

To be completed by the student's parents/guardians
(a separate form is required for each student)

Student Details

Family Name:			
Given Name (s):			
Age: years	D.O.B / /	Class:	
Street Address:			
Suburb:	Postcode:		

Date of exemption applied for: ____ / ____ / ____ to: ____ / ____ / ____

Number of school days: ____

Details of prior/current exemptions: (If applicable)

Date of prior/current exemption from: ____ / ____ / ____ to: ____ / ____ / ____

Number of school days: _____

Copy of Certificate of Exemption attached (Please tick one box ☐): Yes ☐ No ☐

Reason for application for exemption: (Please tick: ☒)

Exceptional domestic circumstances (eg. domestic circumstances, family holidays)	<input type="checkbox"/>
Other exceptional circumstance (eg. health of a student where sick leave or alternate enrolment is not appropriate)	<input type="checkbox"/>
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	<input type="checkbox"/>

Please provide more detail about the reason for the application for exemption here:

NOTE: Where the reason for application for exemption includes long term travel arrangements of more than 20 school days, copies of travel documentation should be included with the application.

Parent / Guardian Details:

Family Name:		
Given Name (s):		
Street Address:		
Suburb:	Postcode:	
Phone Number (s):	Home:	Mobile:
Relationship to Student:		

As the parent/guardian 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 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 of applicant/s: _____

Date: ____ / ____ / ____

Please note:

All Applications for Exemption must be completed at least 2 weeks before the time away from school. This allows time for staff to prepare any necessary work that needs to be completed. It is the parents' and students' responsibility to communicate with class teachers regarding any work that needs to be done.