

ST. MARY'S CATHOLIC SCHOOL, WARREN



CATHOLIC EDUCATION OFFICE WILCANNIA FORBES DIOCESE

Faith, Learning and Transformation in Jesus Christ

Application for Exemption From Attendance at School General

Part A (to be completed by parent/caregiver)

School Details

Name/Suburb..... Tel No.....

Student Details

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

Address.....

..... Postcode.....

Date of Birth..... Age..... Student Number.....

Application For Exemption

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

Reason for Application for Exemption (please tick relevant box)

- Exceptional domestic circumstances.....
- Other exceptional circumstances.....
- Employment in entertainment industry/participation in elite sporting event for short periods of time (ie for 1 or 2 days and at short notice).....

Please provide details about the reason for the Application for Exemption

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Note: Where the reason for Application for Exemption includes travel arrangements of more than 20 school days, copies of travel documentation should be attached to this Application.

Are there any prior current exemptions? No Yes Please provide details below

Dates of prior/current exemption from to Number of school days.....

Is a copy of prior/current Certificate of Exemption attached? Yes No

Parent/Caregiver Details

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

Address.....

..... Postcode.....
Contact Tel..... Relationship to student.....

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 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 can 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 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 any concerns or complaints about the way your personal information has been collected, used or disclosed, please contact the school.

Part B

Principal's Decision and Signature

Application for Exemption of less than 50 days

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

Declined Details.....

Name of Principal Contact Tel

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 Education Office

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

Declined Details.....

Name of Principal Contact Tel

Signature..... Date

Investigating Officer's Recommendations and Signature

Application for Exemption of 50 days or more

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

Declined Details.....

Name of Officer Contact Tel

Signature..... Date

Minister's Decision (to be completed and signed by the Delegate)

Application for Exemption of 50 days or more

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

Declined Details.....

Name of Delegate Position.....

Signature..... Date

Principal completes Certificate of Exemption from Attendance at School