

APPLICATION FOR LEAVE FROM SCHOOL

NOTE: Parts A, B and C are to be completed by the student's parent/carer and returned to

SPC Leave Requests at leaverequests@spc.nsw.edu.au

PART A. Student Details

Please complete the table below with details of all students at this school associated with the period of travel. Separate applications are required for each school if siblings do not attend the same school.

FAMILY NAME	GIVEN NAME(s)	DOB	AGE	GRADE	
' 					
STUDENT ADDRESS			PC	OSTCODE	
START DATE OF PROPOSED LEAVE		END DATE OF PROPOSED LEAVE			
,					
NUMBER OF SCHOOL DAYS ABSENT					
Г					
DEACON FOR LEAVE (Including					
REASON FOR LEAVE (including)	why this leave is occurring during s	school time).			
REASON FOR LEAVE (Including)	why this leave is occurring during s	chool time).			
REASON FOR LEAVE (Including)	why this leave is occurring during s	chool time).			
REASON FOR LEAVE (Including)	why this leave is occurring during s	chool time).			
REASON FOR LEAVE (Including)	why this leave is occurring during s	chool time).			

Relevant travel documentation such as an e-ticket or itinerary (in the case of non-flight bound travel within Australia only) must be attached to this application.

PART B: Details Of Prior Exemptions/Leave (if applicable)

NUMBER OF SCHOOL DAYS ABSENT Assessment Tasks		END DATE OF PRIOR LEAVE		
	e indicated. If there is an Assessr	v any Assessment Tasks your son/s will be abso ent Task clash, the Head of Department / relev		
SUBJECT	TASK DETAILS	DATE OF TASK		
		ı		
ease indicate below of your s	-			
o-curricular Involvement ease indicate below of your s CO- CURRICULA	-	ar activity at the College during the period of leav		
ease indicate below of your s	-			
ease indicate below of your s	-			
ease indicate below of your s	RACTIVITY			
CO- CURRICULA CO- CURRICULA PART C: Parent De	tails			
ease indicate below of your s	tails	RELEVANT COACH/ STAFF MEMBER/ MIC NAME(s)		

I understand that if the application is accepted:

- I am responsible for his supervision during the period of leave.
- The provided period of leave is limited to the period indicated.

period of leave upon acceptance by the College of the reason provided.

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- The provided period of leave is subject to the conditions listed on the Certificate of Leave.
- The period of leave will count towards my child's absences from school.

I declare the information provided in this application 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 Application for Leave from School may result in the provided period of leave being cancelled.

Name of parent/carer (please print):		
Signature of parent/carer:	Date:	
Once you have completed and signed this application	n, please return this form to leaverequests@sp	c.nsw.edu.au

PART D: To be Completed by the Director of Senior School/Middle School

I accept this Application for Leave from School
(Please tick one box) Yes No
Please provide more detail here (if required):
Director of Senior School/Middle School (please print):Telephone Number:
Signature of Director of Senior School/Middle School Date:
Note: Please complete the Certificate of Leave if requested leave is approved.
The original certificate is to be given to the parent, with a copy kept on the student's file.

The parents should be advised to carry the **Certificate of Leave** as it may be requested by government officials including the Department of Immigration and Border Protection, Police, Home School Liaison Officers etc.