1



Application for Exemption from Attendance at School

A2

PART A: To be completed by parent/caregiver. If an exemption is sought for more than one student, separate applications need to be made.

School Details									
ame/Suburb:			Tel. No:						
Student Details									
Family name:	amily name:			Given name(s):					
Address:		-							
				Post	code:				
Date of Birth:		Age:	Age:		lent No:				
Application for Exemption									
If consecutive dates, Dates exemption applied for:	From:		То:		Total number of school days:				
If non-consecutive dates, Individual dates applied for:									
Hours of Exemption (If Partial Exemption, e.g. 9:00am – 11:30am)	From:		То:						
Reason for Exemption from	n Attendanc	e at Sc	chool (tick rele	vant l	box)				
Exceptional circumstances									
Employment in the entertainment industry** Part B must be completed by the employer for applications greater than 10 days.									
 Participation in elite arts/sporting event Please attach A schedule of training or tour itinerary from the arts/sporting body (for example, Australian Institute of Sport) must be attached with contact names and numbers. 									
Name of accredited elite	Name of accredited elite program:								
Reason (tick one): Train	Reason (tick one): Training for elite program \Box Elite program event or tour \Box								



Please provide further detail about the reason for the application for Exemption from Attendance at School							
							(If yes, provide details)
Are there any prior or current exemptions?	Yes			No]	
Dates of prior/current exemption(s) applied for	Fror	n:		То:			No. of school days:
Is a copy of prior/current Certificate of Exemption attached?	Yes			No]	
Parent/Caregiver Details							
Family name:	(Sive	en name(s	s):			
Address:							
					P	ostc	ode:
Contact Tel:	Re	elat	tionship to	stude	nt:		
Declaration and Signature					Date		
Declaration and Signature					Date		

As the parent/caregiver of the above mentioned student, I hereby apply for a Certificate of Exemption from Attendance at School; under the *NSW 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.

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.

Notes: 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: Employer's details. Completed by the employer for the student's employment in the entertainment industry

Only to be completed for the student's employment in the entertainment industry greater than 10 days

Employer's Details					
Company/Corporation Name:					
Contact Person:					
Address					
		Pos	tcode:		
Contact Tel:	Email:				
Reason for the Application for Exempt	ion from Attendanc	e at So	chool		
Attachments					
Detailed itinerary/work schedule for the period of	exemption sought	Yes		No	
Evidence of tutor's teaching qualifications supplied	d by employer	Yes		No	
Evidence that the tutor meets child protection requ	uirements	Yes		No	
Employer's Signature			Date		

Please forward the completed form to the School





PART C: Principal's Recommendation

Completed by the school principal

Principal's Det	ails					
Name:						
Contact Tel:		Email:				
Complete if the	e exem	ption is for the student's participation	in an elite sporting event			
The tutor has consulted the school in the planning and development of this student's educational program for the period of the exemption			Yes □ No □]		
Comment:						
Principal's Doc	oioion (and Signature				
Principal's Dec	SISION &	and Signature				
Granted		Complete Form C2 (Certificate of Exemption from Attendance at School)				
Declined		Details: Complete Letter L2 Declining an Application for Exemption				
Name of Principal: Contact To			et Tel:	el:		
Signature:			Date:			
Where the exe		eriod requested exceeds 100 school days in a 1 consult with the Supervisor: Student Wellbeing an		to		
Date Applicant Notified						
Principal issues Certificate of Exemption from Attendance at School (Form C2)						

