



# Application for Leave

*To be completed by the student's Parents/Guardians  
This form must be submitted 4 weeks prior to the period of leave.*

Dear Parents

Please complete this form if you are wanting to request an absence from school to participate in a holiday or other activities. This form needs to be submitted one month prior to leave date.

As stated in the School Education Act 1999, it is expected all students attend school for each day that it is open, unless unwell and/or physically incapable of attending.

The Act also states parents need to obtain permission from the Principal for their children/child to have a leave of absence from school for an extended holiday or any other reason other than health related.

**Please complete the table below with details of all students associated with the period of leave:**

Family name	Given name	Date of birth	Class

Dates of intended leave from: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ inclusive

Total number of school days: \_\_\_\_\_

**Reason for leave:**

All applications for leave are considered against what is deemed to be in the best interests of the child. Please tick one box below.

Family holidays during school term	
Other exceptional circumstance	

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

---



---



---

**Note:** Where the reason for leave includes long term travel arrangements of more than 10 school days, copies of travel documentation should be included with the application. Where requests for leave involve extended holidays, it is unlikely that subsequent similar requests will be granted.

I have checked the College Calendar/Assessment Booklets regarding both events and all learning activities and have identified what will be missed. **Note:** It is critically important for Senior School students to identify all common assessment tasks that are due during the period of leave. Where set tasks are missed due to leave, it is the responsibility of students to make arrangements with teachers for how and when the tasks will be completed.

During the absence my child will miss the following events and learning activities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Details of prior/current leave absences within this present academic year (if applicable)**

Date of prior/current leave absence from: \_\_\_ / \_\_\_ / \_\_\_ to: \_\_\_ / \_\_\_ / \_\_\_

Number of school days: \_\_\_\_ Prior approval copies attached:(Please tick one box) Yes  No

**PARENT/GUARDIAN DETAILS**

Family name: \_\_\_\_\_

Given name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

As the parent of the above-mentioned student, I hereby apply for extended leave. I understand that if the leave is granted:

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

Signature of applicant/s:

\_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

This absence is authorised  
and is recorded as a 'V'

This absence is unauthorised  
and is recorded as a 'K'

Principal: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_