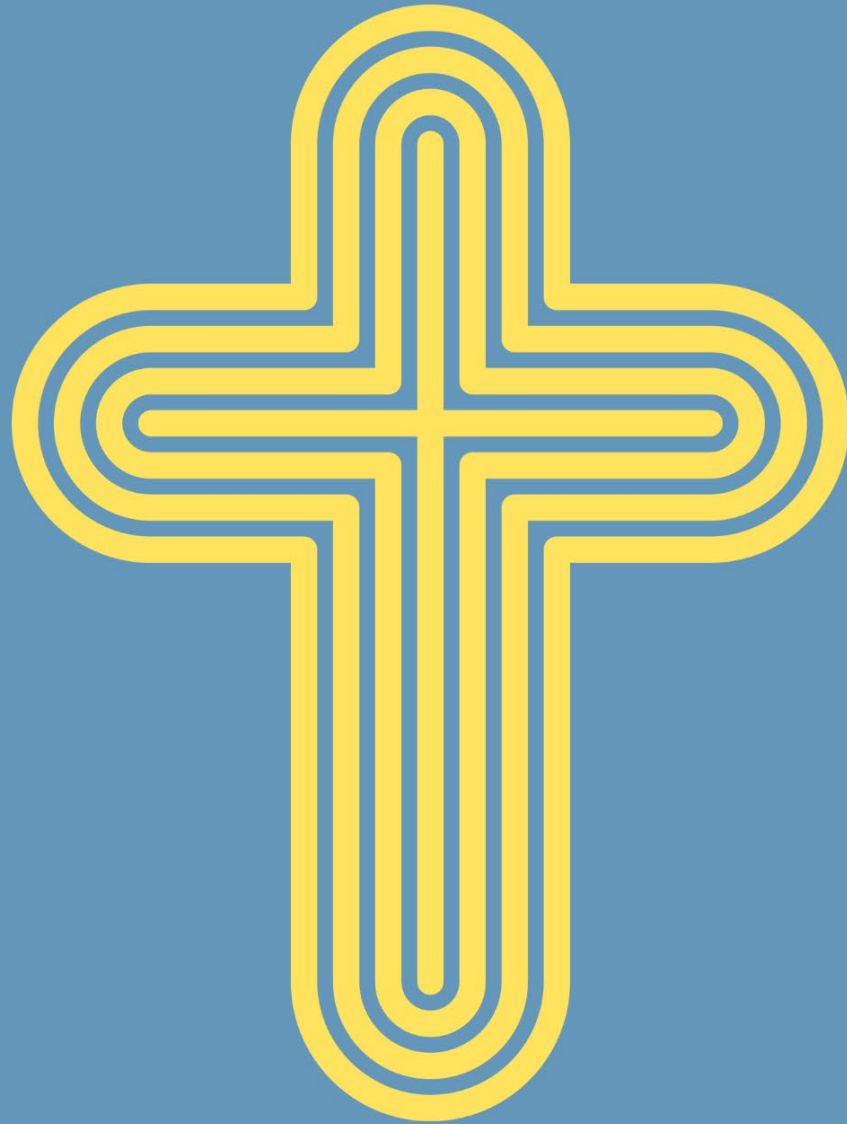


Extended Leave (L) Form



Application for Extended Leave (L) - Travel

To be completed by parent/caregiver for leave of 10 or more days for the purpose of travel within Australia and/or overseas

Student Details				
Family Name	Given Names	DOB	Age	Grade
Address:				
				Postcode:

School Details	
School Name:	School Telephone No.

Application for Extended Leave - Travel			
Dates leave applied for:	From:	To:	Total number of school days:
Reason for travel:			

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

Are there any prior or current leave applications	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<i>(If yes, provide details below)</i>
Dates prior/current leave/exemptions(s) applied for	From:	To:	No. of school days
Is copy prior/current <i>Certificate of Exemption</i> attached?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Parent/Caregiver Details (applicant)	
Family Name:	Given Name(s):
Address:	
	Post Code:
Contact Tel:	Relationship to student:

Declaration and Signature

As the parent/caregiver and applicant for the above mentioned student, I hereby apply for a *Certificate of Extended Leave - Travel* and understand my child/children will be granted a period of extended leave upon acceptance by the principal of the reason provided.

I understand that, if the application is accepted:

- I am responsible for the supervision of the student during the period of extended leave
- The accepted period of extended leave is limited to the period indicated
- The accepted period of extended leave is subject to the conditions listed on the *Certificate of Extended Leave - Travel*
- The period of extended leave will count towards my child's/children's absences from school.

I declare that the information provided in this application for a *Certificate of Extended Leave - Travel* 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 recognize that a failure to comply with any condition set out in the application may result in the exemption being revoked.

Signature of parent/s

Date

Privacy Statement

The information provided will be used to process the student's application for an Extended Leave - Travel during the period indicated. 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.

***Once you have complete and signed this application please return this form to
the school principal***

Certificate for Extended Leave (L) - Travel

The students/s whose details appear below has been granted a period, as indicated, of extended leave from school for the purpose of travel.

Student Details				
Family Name	Given Name	DOB	Age	Grade
Address:				
				Postcode:

School Details	
School name:	School Telephone No.

Dates extended leave applied for:		
From:	To:	Total number of school days:

Reason for the granting of a period of extended leave:

Conditions applicable to the granted period of extended leave:

It has been explained to the parent/caregiver of the above mentioned student/s that they are responsible for his/her/their supervision during the granted period of extended leave. The parent understands that the period of extended leave is limited to the period indicated and acknowledges that the granted period of extended leave is subject to the conditions listed.

Principal name:

Signature:

Date:

This certificate has been issued without alteration and must be produced when requested by police or other authorized attendance officers.