ST PETER'S
ANGLICAN GRAMMAR
Life Through Christ

Application for Exemption from Attendance

Section A - Application for Exemption from Attendance

Application from Exemption from Attendances covers:-

- *Employment in the entertainment industry – Refer to Section B*
- *Participating in elite art or elite sports events – Refer to Section C*
- *Exceptional circumstances (eg health) - Refer to Section D*

STUDENT DETAILS – To be completed by Parent/Carer

FAMILY NAME	GIVEN NAME	DOB	AGE	GRADE

Address: _____

Postcode: _____

School name: St Peter's Anglican Grammar / St Peter's Heart

Dates of exemption from attendance: ____ / ____ / _____ to: ____ / ____ /____

Number of school days: _____ days

DETAILS OF PRIOR LEAVE (if applicable)

Date of prior/current leave from: ____ / ____ / _____ to: ____ / ____ / ____

Number of school days: _____ days

Section B: Employment in the Entertainment Industry

Code M

Please provide more detail about the reason for the Application for Exemption for employment in the entertainment industry, including name of industry performance/activity:

_____

Hours of programme participation for part day only: _____ hours

A schedule of participation from the employer, company or corporation must be attached with contact names and numbers

NOTE:

- Employer's Declaration to be completed
- Where the reason for application for exemption includes long term travel arrangements of more than 20 school days, copies of travel documentation should be included with the application.

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EMPLOYERS DETAILS - to be completed by employer

Name of company/corporation: _____

Address: _____

_____ Postcode: _____

Telephone number: _____

Email address: _____

(Please attach and tick):

1. Detailed itinerary / work schedule for the period of exemption sought: Yes ☐ No ☐
2. Evidence of tutor's teaching qualifications (supplied by employer): Yes ☐ No ☐

Employer's signature: _____Date: ____ / ____ / _____

(Please go to Section E to complete)

Section C: Participating in Elite Arts or Elite Sports Events

Code M

Reason for application for exemption: Please tick (√) one of the following:

Participation in elite sporting event including for short periods of time i.e. for one or two days, and at short notice	
Participation in elite arts program	

Name of elite arts or elite sports program: _____

Reason for the application for exemption (Please provide more detail about the reason for the application for exemption here)

_____

NOTE: Where the reason for application for exemption includes travel arrangements, copies of travel documentation should be included with the application as the school requires evidence of the student's travel.

(Please go to Section E to complete)

Section D: Exceptional Circumstances (health of the student where sick leave or alternative enrolment is not applicable)

Code M

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

_____

_____

_____

Please attach any additional evidence, e.g., health care plan, medical advice etc.

(Please go to Section E to complete)

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Section E: Parent Details / Acknowledgement

Family name: _____ Given name(s): _____

Address: _____

Postcode: _____ Telephone number: _____

Relationship to student/(s): _____

As the parent of the above-mentioned student/(s), I hereby apply for a Certification of Exemption from Attendance and understand my child will be granted a period of leave upon acceptance by the relevant Heads of Schools / Headmaster of the reasons provided.

I understand that if the exemption / leave is granted:

- I am responsible for his/her supervision during the period of exemption
- The exemption of attendance is limited to the period indicated
- The exemption of attendance is subject to the conditions listed on the Certificate of Exemption
- Classwork will not be provided by the teacher for the period of leave

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 within this application later prove to be false or misleading, any decision as a result of this application may be revised.

I further recognise that a failure to comply with any condition set out in this Application may result in the exemption or leave being cancelled.

Reminder for students who attend Before and After School Care or travel on the School Bus Service:

If your child/ren would normally attend the OSHC Services or travel on the School Bus Service, please email these services directly via oshc@stpeters.nsw.edu.au or busservice@stpeters.nsw.edu.au to cancel your child/ren booking whilst on leave. Thank you for your understanding and support.

Signature of Parent/Caregiver: _____ Date _____/_____/_____

(Completed forms to be forwarded to the Administration Office)

To be completed by the Head of School/ Headmaster

I accept this *Application for:*

- *Exemption for attending employment in the entertainment industry* Yes ☐ No ☐
- *Exemption for participating in elite art or elite sports events* Yes ☐ No ☐
- *Exemption due to exceptional circumstances* Yes ☐ No ☐

Head of School / Headmaster Signature: _____ Date:_____