

Application for Exemption from Attendance at School (M)

Form A.2

P	a	rt	· Δ
	u		

To be completed by parent/caregiver - if exemption is sought for more than one student, separate applications need to be made

School Details				
Name/Suburb: St Michael's Primary, Baulkham Hills Tel. No: 9630 05				0 0518
Student Details				
Family name:		Given name(s):	:	
Address:		:		
			Postcode:	
Date of Birth:	A	 ge:	e: Student No:	
	•		·	
Application for Exemption				
If consecutive dates: Dates exemption applied for:	From:	То:	Total r school	number of days:
If non-consecutive dates: Individual dates applied for:				
Hours of Exemption (If Partial Exemption, e.g. 9:00am – 11:30am)	From:	To:		
Reason for Exemption from At	tendance at School ((tick relevant box)		
Exceptional circumstances				
Employment in entertainment ** Part B must be completed				
3. 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 program:				
Reason (tick one): Training for elite program Elite program event or tour				





Please provide more detail about the reason for the application for Exemption from Attendance at School					
Are there any prior or current exemptions?	Yes		No		(If yes, provide details)
Dates of prior/current exemption(s) applied for	From:		To:		No. of school days:
Is copy of prior/current <i>Certificate of Exemption</i> attached?			No		
Parent/Caregiver Details					
Family name:		Given nan	ne(s):		
Address:					
Postcode:					
Contact Tel:	Relati	ionship to st	tudent:		
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 <u>NSW Education Act 1990</u>. 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.

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.

cont'd...



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				
	Postcode:			
Contact Tel: Email:				
Reason for the Application for Exemption from Attendance at Scho	ool			
Attachments				
Detailed itinerary/work schedule for the period of exemption sought	Yes 🗆]	No	
Evidence of tutor's teaching qualifications supplied by employer	Yes []	No	
Evidence that the tutor meets child protection requirements	Yes 🗆]	No	
Employer's Signature		Date		
Please forward the completed to				





Part C: Principal's Recommendation Completed by the school principal Principal's Details Name:

Email:

'	
Complete if the exemption is for the student's participation in an elite sporting even	ıt
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:	

Complete one either (i) or (ii)

Contact Tel:

(I) Principal's Decision and Signature: Application for Exemption of less than 100 days					
Granted		Complete FormC2 (Certificate of Exemption from Attendance at School)			
Declined		Details: Complete Letter L2 Declining an Application for Exemption			
Name of Princip	Name of Principal: Contact Tel:				
Signature:			Date:		
(ii) Principal's Recommendation and Signature: Application is for Exemption of 100 days or more					
Principal makes a recommendation and forwards it to the investigation officer (Director System Performance) at Catholic Education Diocese of Parramatta					
Granted		Forward recommendation to CEDP; CEDP to complete Part D			
Declined		Details:			
Name of Principal: Contact Tel:					
Signature: Date:					

Where the exemption period requested <u>exceeds 100 school days</u> in a 12-month period, the application is to be forwarded to the investigation officer (Director System Performance at CEDP) who will make a recommendation to NSWCEC (Part D)



Date

Principal's Signature



Part D: CEDP Recommendation

Completed by the Investigating Officer at CEDP (Director System Performance) for applications of 100 days or more					
Investigating Officer's Details					
Name:		Position:			
Contact Tel:		Email:			
Contact Tel.		Ellidii.			
Investigating Officer's Recommend	ation				
Following consideration of this applica desirable for:	tion, I am satisfied th	at conditions exist □ do not exist	makin	ng it necessary and/or	
Name of stu	udont	To be exempt from attend	dance at	school.	
Name of Sit.	iuerii				
I recommend that the Certificate of Ex	emption be: Gra	nted □ Not Granted □			
Reasons for recommendation not to grant a Certificate of Exemption					
Suggested conditions applying to the recommendation to grant a Certificate of Exemption					
Investigating Officer's Signature			Date		





Executive Director's Recommendation Completed by the Executive Director of School CEDP for applications of 100 days or more				
Name:				
Email:	Contact Tel:			
Following consideration of this application, I am satisfied desirable for:	d that conditions exist \square do not exist \square making it necessary and/or			
Name of student I recommend that the Certificate of Exemption be:	To be exempt from attendance at school. Granted □ Not Granted □			
Executive Director's Signature	Date			
Part E: Minister's Recommendation Completed by the Minister's delegate for application	ns for 100 or more days			
Minister's Recommendation (to be completed by the L	Delegate)			
Following consideration of this application, I am satisfied that conditions exist do not exist making it necessary and/or desirable for:				
To be exempt from attendance at school. Name of student				
Delegate's Details				
Name:	Position:			
ontact Tel: Email:				
Delegate's Signature Date				
Date Applicant Notified				

Principal issues Certificate of Exemption from Attendance at School (Form C2)

