Application for Extended Leave – Vacation/ Travel

NOTE: PART A is to be completed by the student’s parent and returned to their child’s school principal.

PART A: STUDENT DETAILS

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

<table>
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<tr>
<th>FAMILY NAME</th>
<th>GIVEN NAME</th>
<th>DOB</th>
<th>AGE</th>
<th>GRADE</th>
<th>SRN</th>
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Student address: __________________________________________________________

________________________________________________________________________

Postcode: ______________

School name: _____________________________________________________________

Dates of extended leave applied for: From: ____/____/____ to ____/____/____

Number of school days: ______________

Reason for travel: __________________________________________________________

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

PART A: DETAILS OF PRIOR EXEMPTIONS/ EXTENDED LEAVE – VACATION/ TRAVEL (if applicable)

Date of prior exemption/extended leave: From: ____/____/____ to ____/____/____

Number of school days: ______________

Copy of Certification of Exemption/Extended Leave – Travel attached (Please tick ☑) Yes ☐ No ☐
**PARENT DETAILS (Applicant)**

Family name: ________________________________ Given Name: ________________________________

Address: ___________________________________________________________________________ Postcode: ________________________________

Telephone number: __________________________ Relationship to student: ________________________________

As the parent and applicant, I hereby apply for a *Certificate of Extended Leave-Vacation/ Travel* and understand my child 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 his/her supervision during the period of extended leave

— The provided period of extended leave is limited to the period indicated

— The provided period of extended leave is subject to the conditions listed on the *Certificate of Extended Leave-Vacation/ Travel*

— The period of extended leave will count towards my child’s absences from school

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 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 *Application for Extended Leave- Vacation/ Travel* may result in the provided period of extended leave being cancelled.

Signature of parent/s: ________________________________ Date: _____ / _____ / _____
PART B: TO BE COMPLETED BY THE PRINCIPAL

I accept this Application for Extended Leave - Vacation/ Travel
(Please tick one box):  
Yes ☐  No ☐

Please provide more detail here (if required):

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Principal’s name (please print): ___________________________ Telephone number: ___________________________

Signature of principal: ___________________________ Date: ___/ ____/ _____

Note: Please complete the Certificate of Extended Leave – Vacation/ Travel if requested leave is to be approved.