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

<table>
<thead>
<tr>
<th>Family Name</th>
<th>Given Name</th>
<th>DOB</th>
<th>Age</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
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</table>

| Address: |

| Postcode: |

School Details

<table>
<thead>
<tr>
<th>School Name:</th>
<th>School Telephone No.</th>
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<tbody>
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</table>

Application for Extended Leave – Travel

Dates leave applied for:  
From:  
To:  
Total

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 (for 2016 applications this is inclusive of recent approved exemptions for travel during 2015)?  
Yes  
No  
(If yes, provide details below)

Dates of prior/current leave/exemption(s) applied for  
From:  
To:  
No of schools days:

Is copy of prior /current Certificate of Exemption attached?  
Yes  
No
Parent/Caregiver Details (applicant)

Family Name: 
Given Name: 
Address: 
Postcode: 
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 exemption is granted:
• 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 information provided in this Application for Extended Leave 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.

Signature of applicant/s ................................................................. Date ................................

Once you have completed and signed Part A please return this form to the school principal.

Privacy Statement

The information that you provide will be used to process the student’s Application for 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 a concern or complaint about the way your personal information has been collected, used, or disclosed, you should contact the school.

Once you have completed and signed this application please return this form to the school principal.
PART B

PRINCIPAL’S DECISION AND SIGNATURE

Application for Exemption of LESS THAN 50 days

Granted □ (Complete Certificate for Extended Leave (L) – Travel)

Declined □ Details..........................................................................................................

Principal’s name............................................................................................Telephone

Signature...........................................................................................................Date

PRINCIPAL’S RECOMMENDATION AND SIGNATURE

If application is for exemption of 50 DAYS OR MORE the principal makes a recommendation and
forwards it to the Catholic Schools Office.

Granted □ (Complete Certificate for Extended Leave (L) – Travel)

Declined □ Details..........................................................................................................

Principal’s name............................................................................................Telephone

Signature...........................................................................................................Date

INVESTIGATING OFFICER’S RECOMMENDATION AND SIGNATURE

Application for Exemption of 50 DAYS OR MORE

 Granted □ (Complete Certificate for Extended Leave (L) – Travel)

Declined □ Details..........................................................................................................

Officer’s name................................................................................................Telephone

Signature...........................................................................................................Date

MINISTER’S DECISION (to be completed and signed by the delegate)

Application for Exemption of 50 DAYS OR MORE

 Granted □ (Complete Certificate for Extended Leave (L) – Travel)

Declined □ Details..........................................................................................................

Delegate’s name................................................................................................Telephone

Signature...........................................................................................................Date

Principal completes Certificate for Extended Leave (L) – Travel if exemption is granted.