APPLICATION FOR EXTENDED LEAVE – TRAVEL (more than ten days)
Complete this form for absences of more than ten days.
For absences ten days or less, complete the student absence/illness note only.

NOTE: PARTS A, B and C are 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 at this school associated with the period of travel. Separate applications are required for each school if siblings do not attend the same school.

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<tr>
<th>FAMILY NAME</th>
<th>GIVEN NAME</th>
<th>DATE OF BIRTH</th>
<th>AGE</th>
<th>CLASS</th>
<th>Enrolment Register Number (office use)</th>
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Student address: __________________________________________________________ Postcode: __________

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

Number of school days: _______________

Reason for travel (including why this travel is occurring in school time):

___________________________________________________
___________________________________________________
___________________________________________________

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 B: PREVIOUS EXEMPTIONS/EXTENDED LEAVE – TRAVEL:

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

Number of school days: _______________

Certificate of prior Exemption/Extended Leave -Travel attached (Please tick):  Yes  No

PART C: PARENT DETAILS

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 - 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 - 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 - Travel may result in the provided period of extended leave being cancelled.

Signature of parent/s: ____________________________________________ Date: ______________________

PART D: TO BE COMPLETED BY THE PRINCIPAL

I accept this Application for Extended Leave – 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 – Travel if requested leave is approved. The original Certificate is to be given to the parent, with a copy kept on the student’s file.