

APPLICATION FOR EXTENDED LEAVE / EXTENDED TRAVEL



Please complete and return this Extended Leave /Extended Travel form for any leave of ten (10) or more consecutive school days of absence.

Parents of the below mentioned student/s are responsible for his/her supervision during the provided period of extended leave.

The Parent understands that the period of extended leave is limited to the period indicated, will count towards the child's absences from school and acknowledges that the provided period of extended leave is subject to the conditions noted below, if applicable.

Relevant travel documentation such as an e ticket or itinerary must be attached to this application (travel within Australia is exempt from this requirement).

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

FAMILY NAME	GIVEN NAME	DATE OF BIRTH	CLASS

Students Address: _____ Postcode: _____

Date of Extended Leave: From ___/___/___ to ___/___/___ School days absent: _____

Reasons for providing the period of extended leave:

DETAILS OF PRIOR EXTENDED LEAVE / EXTENDED TRAVEL

Date of prior Extended Leave: From ___/___/___ to ___/___/___ School days absent: _____

PARENT DETAILS (Applicant)

Family Name: _____ Name: _____

Telephone Number: _____ Relationship to Student: _____

Signature of parent/s: _____ Date: _____

FOR DEPUTY PRINCIPALS COMPLETION

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

Conditions applicable to providing the period of extended leave:

Deputy Principal's name: _____

Quakers Hill Public School

Signature of Deputy Principal: _____

Date: _____

PRIVACY STATEMENT

The Department of Education and Communities is subject to the Privacy and Personal Information Protection Act 1998. The information that you provide will be used to process your child's Application for Extended Leave / Extended Travel during the period indicated.

It will only be used or disclosed for the following purposes.

- * General student administration relation 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.

Please sign and date below in acknowledgement of the above.

Signature of parent/s: _____

Date: _____