

## Application for Extended Leave - Travel

(for absences of more than two school weeks)

**NOTE 1:** Parts A, B and C are to be completed by the student's parent / carer and returned to the Principal.

**NOTE 2:** Students enrolled at BDC are part of a government census that occurs the first Friday in August. Students MUST attend the school for at least one day during the census reference period, which is the 20 school days leading up to and including the census day. School holidays, public holidays and weekends are not part of the 20-day census reference period.

**NOTE 3:** Please submit your application at least the term before the requested leave.

### PART A: STUDENT DETAILS

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

FAMILY NAME	GIVEN NAME	DOB	AGE	GRADE

Student address: \_\_\_\_\_

Postcode: \_\_\_\_\_

School name: \_\_\_\_\_

Dates of extended leave applied for: from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Number of school days: \_\_\_\_\_ (Where the period applied for is more than one term parents should consider distance education.)

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

Date of prior exemption/extended leave: from: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Number of school days: \_\_\_\_\_

Copy of *Certificate of exemption/extended leave – vacation/travel* attached Yes  No  (Please tick )

**PART C: PARENT / CARER DETAILS**

Note: In the case of split families **both** parents are required to sign this form

Family name: \_\_\_\_\_ Given name: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

As the parent / carer 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 / carer 1: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of parent / carer 2: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If this *Application for extended leave – travel* is approved a *Certificate of extended leave – travel* will be issued by the Principal.

It is advisable that the *Certificate of extended leave – travel* be carried as it may be requested by government officials, including the Department of Immigration and Border Protection, police, and home school liaison officers.

**PART D: TO BE COMPLETED BY THE PRINCIPAL**

I accept this *Application for extended leave - vacation/travel*

Yes  No  (Please tick )

Please provide more detail here (if required):

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Simon Doyle, Principal

Telephone number: (02) 6651 5644

Principal's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

