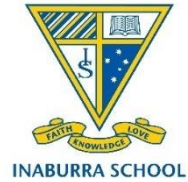


# INABURRA SCHOOL

## APPLICATION FOR EXEMPTION FROM ATTENDANCE AT SCHOOL: EMPLOYMENT IN THE ENTERTAINMENT INDUSTRY



**PART A: TO BE COMPLETED BY THE STUDENT'S PARENT/CAREGIVER AND RETURNED TO THE PRINCIPAL.**

### Student Details

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Year/Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Date of birth: \_\_\_\_\_ (dd) / \_\_\_\_\_ (mm) / \_\_\_\_\_ (year)

Address:

\_\_\_\_\_

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

School name: Inaburra School

### Full or part time exemption?

Full time      Part time

### Period of exemption

Please complete A, B or C:

A) Dates of exemption applied for (if consecutive days):

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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

B) Full school days applied for (if not consecutive days) :

\_\_\_\_\_

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

C) If applying for part time exemption (if partial exemption)

Date

Please provide more detail about the reason for the application for exemption for employment in the entertainment industry, including name of industry performance/activity:

**Supporting documentation required**, e.g., health care plan, medical advice etc.

**NOTE:**

PART B: TO BE COMPLETED BY THE EMPLOYER

**PART C: PRINCIPAL'S DECISION**

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

Following consideration of this application for exemption from attendance, I am/am not (delete whichever does not apply) satisfied that conditions exist that make it necessary and/or desirable for \_\_\_\_\_ (name of student) be exempt from attendance at school.

I recommend that a Certificate of Exemption be (Please tick one box):

Granted

Not granted

Reasons for not granting exemption (if applicable):

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Name of Principal: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_

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

Notification to applicant: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

**Note: The Principal is requested to provide a Certificate of Exemption if exemption is granted.**