

St JOHN PAUL II CATHOLIC COLLEGE



Application for Short Term Leave (Leave between 1 and 9 days)

To be completed by Parent/Caregiver and returned to the school PRIOR to leave date.

Student/s Details				
Family Name	Given Name	Date of Birth	Age	Homeroom

Start Date of Leave	End Date of Leave	Total No. of School Days
Reason for Absence		

I understand that:

- I am responsible for the supervision of the student/s during the period of leave
- The accepted period of leave is limited to the period indicated
- The period of leave will count towards my child's/children's absences from school.
- **Prior to taking leave it is the student's responsibility to ensure that all assessment tasks are completed or that an extension of time for work is approved by the teachers. If granted confirmation of extensions are to be written in the student's diary by the teacher concerned.**
- **The student must arrange for all missed work to be copied/collected on return to school.**

Signature of Parent/Caregiver	Date