

Part A

Street No. and Name

Suburb

Postcode

Phone Number

Application for Extended Leave Travel (more than 5 days)

Family holidays and travel outside of school holiday period will be considered individually based on your child's attendance, the intention of the extended leave, and the impact on your child's participation and progress at school.

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

Student/s Details						
Surname	First Name	Date of Birth	Age	Year		
Student Address						
Street No. and Name						
Suburb						
Postcode						
Details of Extended Leave						
Start Date of Leave	End Date of Leave	Total No. of School Days				
Reason for Travel						
Parent/Caregiver Details						
Surname	First Name	Relationship to	Student/s			
Parent/Caregiver Address						



As the parent/caregiver and the applicant for the above-mentioned student/s, I hereby apply for a Certificate of Extended Leave – Travel and understand that my child/ren will be granted a period of extended leave upon acceptance by the Principal for the reason provided.

I understand that, if the application is accepted:

- I am responsible for the supervision of the student/s during the period of extended leave
- The accepted period of extended leave is limited to the period indicated
- The accepted period of extended leave is subject to the conditions listed on the Certificate of Extended Leave
- The period of extended leave will count towards my child/ren's absences from school.

I declare that 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 Certificate of Extended Leave may result in the provided period of extended leave being cancelled.

Signature of Parent/Caregiver	Date	

Privacy statement

The information provided will be used to process the student's Application for Extended Leave – Travel during the period indicated. It will only be disclosed for the following purposes:

- General student administration relating to the education and welfare of the student
- Communication with students and parents/caregivers
- 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.

Once you have completed and signed this application, please click submit.



OFFICE USE ONLY				
Part B To be completed by the Principal				
I accept this Application for Extended Leave – Travel	Yes			
	No			
Please provide more detail here (if required)				
Signature of Principal				
Date				

Please complete the Certificate of Extended Leave - Travel if requested leave is approved.