DIOCESE OF LISMORE CATHOLIC SCHOOLS OFFICE



Form A4 Notification Extended Leave Travel

Information: From the beginning of 2015, family holidays and travel are no longer considered under the Exemption from School – Procedures and therefore, as a general rule, principals should not approve leave for this purpose. An absence in this case will be recorded using the code 'A' (Unjustified Leave). Travel outside of vacation period is now counted as an absence for statistical purposes. In exceptional circumstances parents may complete a Form A1 Application for Extended Leave-Travel for consideration explaining why an absence for extended leave is in the best educational interest of the student.

For leave greater than 50 days (10 weeks of a school term) access to distance education or enrolment in another school must be considered.

PART A (Parent/Caregiver to complete)						
School name						
Please complete table be	elow with details of all s	student(s) associa	ated with the	period of travel.		
FAMILY NAME	GIVEN NAME	DOB	AGE	GRADE		
Student address			Postcode			
Start date of leave		End date of	leave			
Number of school days	absent					
Reason for travel (including why this travel is occurring during school time)						
Relevant travel documen application.		·				
DETAILS OF PRIOR EXEXTENDED LEAVE	(TENDED LEAVE NO	TIFICATIONS OF	R APPLICAT	ONS FOR		
Start date of leave		End date of	leave			

PARENT/CAREGIVER D	ETAILS				
Family name					
Given name					
Street address					
Town		Po	stcode		
Telephone number	Relatio	nship to			
	studen	t			
DECLARATION/SIGNATI	JRE				
As the parent/caregiver of the above mentioned student(s), I declare that the information provided in the attached form is to the best of my knowledge and belief, accurate and complete. I understand that I am responsible for his/her (their) supervision during the period of extended leave. I understand that the period of extended leave will count towards my child/children's absences from school and that those absences will be marked as code 'A' (Unjustified Leave). Signature of parent/caregiver					
PART B (School to comp	ete)				
I acknowledge receipt of th	is Notification of Extended Lo	eave Travel.			
Principal's signature			Date		