



ST GEORGE CHRISTIAN SCHOOL

# Application for Leave – Vacation/Travel

**To be completed by the student's parent and returned to the Principal**

**Please note** - holiday leave is not recommended for **Senior School** students. We recommend discussing your holiday plans with your child's Year Adviser prior to booking your holiday.

## STUDENT DETAILS

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

FAMILY NAME	GIVEN NAME	DOB	AGE	GRADE	SRN

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

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

Dates of leave applied for: From: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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

Reason for travel: \_\_\_\_\_

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.

## DETAILS OF PRIOR EXEMPTIONS/ LEAVE – VACATION/ TRAVEL (if applicable)

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

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

**PARENT DETAILS (Applicant)**

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

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

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

Email: \_\_\_\_\_

As the parent and applicant, I hereby apply for *Leave-Vacation/ Travel* and understand my child will be granted 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 leave is subject to any conditions which the *Principal may deem necessary*
- The period of 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 Leave- Vacation/ Travel* may result in the provided period of extended leave being cancelled.

Signature of parent/s: \_\_\_\_\_

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

e: PrincipalPA@sgcs.nsw.edu.au