



KESSER TORAH COLLEGE LIMITED
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 ABN 27 003 164 092

Application for Exemption from Attendance at School

To be completed by the student's Parents/ Caregivers

Date form is being completed (must be 4 weeks before absence) / /

STUDENT DETAILS:

Surname: Firstname:

Year Level:

Address:

Suburb: Postcode:

Date of exemption applied for: / / to / /

Total number of school days absent:

PARENT/CAREGIVER DETAILS:

Family name: Given name(s):

Email Address:

Address:

Suburb: Postcode:

Telephone Number: Relationship to Student:

Reason for application for exemption (please tick):

- Exceptional domestic circumstance
- Other exceptional circumstance
- Direction under Section 42D of the Public Health Act 1991
- Employment in entertainment industry/participation in elite sporting event for short periods of time i.e. for one or two days, and at short notice.

Please provide more detail about the reason for the application for exemption here:

NOTE: Where the reason for application for exemption includes long term travel arrangements of more than 20 school days, copies of travel documentation should be included with the application.

As the parent of the above mentioned student, I hereby apply for a Certificate of Exemption from attendance at school, under the *Education Act 1990*. I understand that if the exemption is granted:

- I am responsible for his/her supervision during the period of exemption
- the exemption is limited to the period indicated
- the exemption is subject to the conditions listed on the Certificate of Exemption
- the exemption may be cancelled at any time.

I declare the information provided in this application for a certificate of exemption 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 exemption may result in the exemption being revoked.

Signature of applicant/s:

Date: / /

SCHOOL APPROVAL:

Approval - General Studies: _____
(Noelene Bellingham / Gersha Shteyman)

Dated: ____ / ____ / ____

Approval - Jewish Studies: _____
(Rabbi Mllecki / Rabbi Chaiton / Dvora Moss)

Dated: ____ / ____ / ____

I recommend that this application from attendance at school is (please tick):

Granted

Not Granted

Please provide more detail here (if required):

Signature of Principal: _____

Dated: ____ / ____ / ____

Mr Roy Steinman