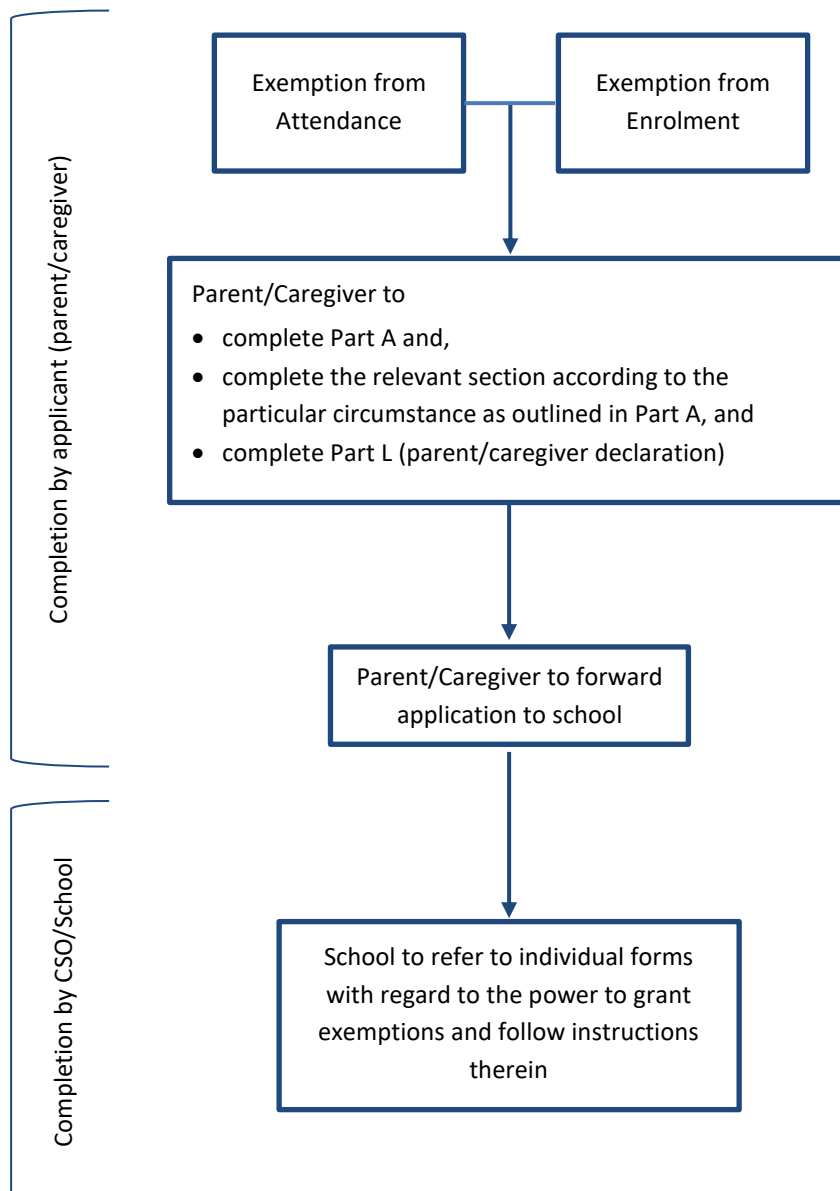




Catholic Schools Broken Bay

Form B1
Application form

Application for Exemption from School (M) *(including flowchart to assist form completion)*



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Power to Grant Exemptions

The following table sets out the approval pathway for the particular circumstance. Please contact CSBB to discuss circumstances outside this range of exemptions

| Exemption from ATTENDANCE at school | | Exemption from ENROLMENT at school | |
|--|-------------------------------|---|-------------------------------|
| Circumstance These exemptions apply to students from 6 to 17 years of age (inclusive) | Delegated approved authority* | Circumstance These exemptions apply to students from 6 to 17 years of age (inclusive) | Delegated approved authority* |
| 1. Exemption from attendance for students engaged in employment in approved entertainment industry activities up to 100 days in a twelve month period for any one student. | Principal | 1. Exemption from enrolment (up to 100 days) <ul style="list-style-type: none"> Age (the student has turned 6 years of age on or after 1 October) Health, learning or social needs or disability | Director of Schools |
| 2. Exemption from attendance for students participating in elite arts or elite sporting events up to 100 days in a twelve month period for any one student. | Principal | 2. Exemption from enrolment (more than 100 days) <ul style="list-style-type: none"> Age (the student has turned 6 years of age on or after 1 October) Health, learning or social needs or disability | Minister of Education |
| 3. Exemption from attendance totalling up to 100 days in a twelve month period for any one student if the exemption does not involve a short-term transition to school plan | Principal | 3. Exemption from enrolment The student has completed Year 10 and is seeking approval to complete compulsory education at either (or a combination of): (i) TAFE or another RTO and/or (ii) an apprenticeship/traineeship and/or (iii) by participating in full-time paid work for an average of 25 hours per week. | Principal |
| 4. Exemption from attendance totalling up to 100 days in a twelve month period for any one student if the exemption involves the development of a short-term transition to school plan | School Consultant | 4. Exemption from enrolment – Special Circumstances The student has completed Year 9 and is seeking approval to complete the equivalent of Year 10 at TAFE | Principal |
| 5. Exemption from attendance totalling more than 100 days in a twelve month period for any one student. | Minister of Education | 5. Exemption from enrolment at school – Special Circumstances <ul style="list-style-type: none"> The student has completed Year 9 and is seeking approval to complete the equivalent of Year 10 through an apprenticeship/traineeship The student has completed Year 9 and is seeking approval to complete education in circumstances that are not covered in any of the scenarios listed on this form. | Director of Schools |
| *Under Section 25 of the Education Act 1990, the Minister may grant a Certificate of Exemption. This power is delegated to persons respective to the exemption category as listed above. The approved authority indicated in the table represents the minimum level at which this delegation has been authorised. The Director of Schools also has delegated authority to approve exemptions in all cases except those that can only be approved by the Minister. This may be required in the absence of the Principal or where particular cases require further consultation. | | | |

Part A: Reason for Exemption

The part is to be completed by parent/caregiver; if exemption is sought for more than one students, separate applications need to be made

| School Details | |
|----------------|----------|
| Name/Suburb: | Tel. No: |

| Student Details | | |
|-----------------|--|-------------|
| Family name: | Given name(s): | |
| Address: | | Postcode: |
| Date of Birth: | Age (as at date of application): | Student No: |
| Grade: | ATSI: Yes <input type="checkbox"/> No <input type="checkbox"/> | |

| Reason for Exemption from Attendance/Enrolment at School (please tick relevant box) | |
|---|---|
| Exemption from Attendance at School | <input type="checkbox"/> Exceptional circumstances (medical, trauma, other) (complete Part B and L) |
| | <input type="checkbox"/> Exceptional circumstances (medical, trauma, other) resulting in the need to develop a plan to return the student to fulltime attendance (complete Part C and L; Part C is to be completed in consultation with the school) |
| | <input type="checkbox"/> Employment in the entertainment industry (complete Part D and L) |
| | <input type="checkbox"/> Participation in an accredited elite sporting event (complete Part D and L) |
| | <input type="checkbox"/> Participation in an elite arts program (complete Part D and L) |
| Exemption from Enrolment at School | <input type="checkbox"/> Age: where a child turns six years on or after 1 st October and is engaged in full-time pre-school education at an accredited pre-school for the remainder of the school year (complete Part E and L) |
| | <input type="checkbox"/> Participation in full- or part time accredited pre-school programs for students with disabilities leading to enrolment and full time attendance at a government or registered non-government school no later than six months after the child's sixth birthday (complete Part E and L) |
| | <input type="checkbox"/> The health, learning or social needs, or disability of a child necessitates the continuation of an individual program supported by medical specialists no longer than six months after the child's 6 th birthday. This could include a student who has an ongoing medical issue that prevents them from attending school (complete Part E and L). |
| | <input type="checkbox"/> Student has completed Year 10 and is seeking to complete compulsory education either at (i) TAFE or another RTO or (ii) through a full time apprenticeship/traineeship (complete Part F and L) |
| | <input type="checkbox"/> Student has completed Year 10 and has been offered an average of 25 hours per week guaranteed work (complete Part G and L) |
| | <input type="checkbox"/> Student has completed Year 10 and is seeking approval to complete compulsory education in a combination of approaches: enrolment at TAFE/RTO and/or apprenticeship/traineeship and/or paid work (complete Part H and L) |
| Exemption from Enrolment at School (in special circumstances) | <input type="checkbox"/> Student has completed Year 9 and has been offered a full time apprenticeship/traineeship at TAFE or another Registered Training Organisation (RTO) (complete Part I and L) |
| | <input type="checkbox"/> Student has completed Year 9 but due to the student's circumstances cannot complete Year 10 at school and is seeking to complete the equivalent of Year 10 at TAFE (complete Part J and L) |
| | <input type="checkbox"/> Student has completed Year 10 but due to the student's circumstances cannot complete the remainder of secondary education by any means set out in 13.3 of the DSS attendance procedures (complete Part K and L) |

Part B: Exemption from Attendance at School due to Exception Circumstances (medical, trauma, other)

This part is to be completed by the applicant's parent(s)/caregiver(s)

Details of contact person for student (parent/caregiver)

Name:

Address:

Email:

Phone:

Details of exemption

| Dates of exemption | From: | To: | Total number of whole school days: |
|--------------------|-------|-----|------------------------------------|
|--------------------|-------|-----|------------------------------------|

Attachments:

- Attach documentation to support this application, which must include but is not limited to medical reports, psychologist reports and other referring practitioner reports

Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed

Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.

Part C: Exemption from Attendance at School due to Exceptional Circumstances necessitating the need to develop a short term Transition Plan

This part is to be completed by the applicant's parent(s)/caregiver(s) in consultation with the school

Details of contact person for student (parent/caregiver)

Name:

Address:

Email:

Phone:

Contact details of health care professional supporting this plan:

Details of exemption

Dates of exemption
(include part days)

From:

To:

Total number of part days:

Total number of whole school days:

Reason for this plan

| | | |
|--------------------------|--|--|
| <input type="checkbox"/> | Behaviour support/risk management plan | Attach behaviour support and/or risk management plan |
| <input type="checkbox"/> | Health care plan | Attach consultation with health care professional |
| <input type="checkbox"/> | Student attendance plan | Attach student attendance plan |

Plan details

Plan start date

Plan end date

Plan review date (max 5 weeks from implementation):

Name of school staff supporting this plan:

Name of CSBB staff supporting this plan:

Details of attendance

| Week/Term | Monday (insert times) | | Tuesday (insert times) | | Wednesday (insert times) | | Thursday (insert times) | | Friday (insert times) | |
|-----------|--------------------------|--------|---------------------------|--------|-----------------------------|--------|----------------------------|--------|--------------------------|--------|
| | Attend | Exempt | Attend | Exempt | Attend | Exempt | Attend | Exempt | Attend | Exempt |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.

Note:

- **Participation in a transition to school program must be recommended for approval by the Schools Consultant prior to the exemption being granted under the Minister's delegation. CSBB Student Attendance and Wellbeing Officer will consult with School's Consultant for this application.**
- **The review date for this plan would normally be 5 weeks.**

Part D: Exemption from Attendance at School due to Engagement in the Entertainment Industry, or an Accredited Elite Sporting Event, or an Elite Arts Program

This part is to be completed by the applicant's parent(s)/caregiver(s)

Details of event/industry/program

Name of industry/event/program:

Address:

Email:

Phone:

Details of exemption

| Dates of exemption | From: | To: | Total number of whole school days: |
|--|-------|-----|------------------------------------|
| Hours and duration of participation (e.g from 8am to 4pm daily, 5 days per week) | | | |

Attachments:

- Detailed itinerary/work schedule for period of exemption sought
- Evidence of tutor's teaching qualifications (supplied by employer) if the application is for the entertainment industry

Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed

Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.

Part E: Exemption from Enrolment at School due to age or health, learning or social needs, or disability of a child

Details of exemption from enrolment at school due to:

- The child turns 6 years on or after 1st October and is engaged in full-time pre-school education at an accredited pre-school for the remainder of the school year
- Participation in full- or part time accredited pre-school programs for students with disabilities leading to enrolment and full time attendance at a government or registered non-government school no later than six months after the child's sixth birthday.
- The health, learning or social needs, or disability of a child necessitates the continuation of an individual program supported by medical specialists no longer than six months after the child's 6th birthday. This could include a student who has an ongoing medical issue that prevents them from attending school.

This part is to be completed by the applicant's parent(s)/caregiver(s)

Details of accredited pre-school/individual program

Name of accredited pre-school/individual program:

Address:

Email:

Phone:

Details of exemption

Planned date on which the child will be enrolled at the school:

Dates of exemption

From:

To:

Total number of whole school days:

Attachments:

- Attach documentation to support this application, which must include but is not limited to medical reports, psychologist reports and other referring practitioner reports

Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed

Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.

Part F: Exemption From Enrolment at School: The student has completed Year 10 and is seeking approval to complete compulsory education at either (i) TAFE or another RTO or (ii) through a full-time apprenticeship/traineeship

This part is to be completed by the applicant's parent(s)/caregiver(s)

| Details of TAFE/company/corporation | | |
|---|--------|----|
| Name | | |
| Address: | | |
| Email: | Phone: | |
| Details of exemption | | |
| Student has fulfilled the requirements for the award Record of School Achievement (RoSA) | Yes | No |
| Current age of the student: | | |
| Date at which the student turns 17: | | |
| Proposed date of student's last school day: | | |
| Proposed commencement date: | | |
| Attachments: <ul style="list-style-type: none"> • For apprenticeship/traineeship: <ul style="list-style-type: none"> ➔ External Apprenticeship Network Provider details (https://www.australianapprenticeships.gov.au/about-aasn) ➔ Training plan/proposal (https://www.training.nsw.gov.au/forms_documents/index.html#training-plans) ➔ Training contract (https://www.aapathways.com.au/about/apprenticeship-traineeship-training) • Statement from school principal outlining the reasons for supporting this application. • Documentation to support this application, which may include but is not limited to psychologist reports and other referring practitioner reports | | |
| Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed | | |
| Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal. | | |

Part G: Exemption from Enrolment at School: The student has completed Year 10 and is seeking approval to complete compulsory education by participating in full-time paid work for an average of 25 hours per week.

This part is to be completed by the applicant's parent(s)/caregiver(s)

| Details of employer | | |
|--|--------|----|
| Name | | |
| Address: | | |
| ABN of employer: | | |
| Email: | Phone: | |
| Details of exemption | | |
| Student has fulfilled the requirements for the award Record of School Achievement (RoSA) | Yes | No |
| Current age of the student: | | |
| Date at which the student turns 17: | | |
| Proposed date of student's last school day: | | |
| Proposed commencement date of work: | | |
| Hours and duration of work (e.g from 8am to 4pm daily, 5 days per week): | | |
| Attachments: <ul style="list-style-type: none"> • Declaration from the employer that the work arrangement is for the stated period of the exemption and required minimum hours (25 per week) • Documentation to support this application, which may include but is not limited to medical reports, psychologist reports and other referring practitioner reports | | |
| Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed | | |
| Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal. | | |

Part H: Exemption from Enrolment at School: The student has completed Year 10 and is seeking approval to complete compulsory education through a combination of enrolment at TAFE/RTO, apprenticeship/traineeship and paid work.

This part is to be completed by the applicant's parent(s)/caregiver(s)

| Details of employer | | |
|---|--------|----|
| Name | | |
| Address: | | |
| ABN of employer: | | |
| Email: | Phone: | |
| Details of exemption | | |
| Student has fulfilled the requirements for the award Record of School Achievement (RoSA) | Yes | No |
| Current age of the student: | | |
| Date at which the student turns 17: | | |
| Proposed date of student's last school day: | | |
| Proposed commencement date of work: | | |
| Hours and duration of work (e.g from 8am to 4pm daily, 5 days per week): | | |
| <p>Attachments:</p> <ul style="list-style-type: none"> • Declaration from the employer that the work arrangement is for the stated period of the exemption and required minimum hours (25 per week) • Documentation to support this application, which may include but is not limited to medical reports, psychologist reports and other referring practitioner reports • For apprenticeship/traineeship: <ul style="list-style-type: none"> ➔ External Apprenticeship Network Provider details (https://www.australianapprenticeships.gov.au/about-aasn) ➔ Training plan/proposal (https://www.training.nsw.gov.au/forms_documents/index.html#training-plans) ➔ Training contract (https://www.aapathways.com.au/about/apprenticeship-traineeship-training) | | |
| Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed | | |
| <p>Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.</p> | | |

Part I: Exemption from enrolment at school due to Special Circumstances: The Student has completed Year 9 and is seeking to complete the equivalent of Year 10 through an apprenticeship/traineeship

This part is to be completed by the applicant's parent(s)/caregiver(s)

Details of exemption

Date at which the student turns 17:

Proposed date of student's last school day:

Attachments:

- For apprenticeship/traineeship:
 - ➔ External Apprenticeship Network Provider details (<https://www.australianapprenticeships.gov.au/about-aasn>)
 - ➔ Training plan/proposal (https://www.training.nsw.gov.au/forms_documents/index.html#training-plans)
 - ➔ Training contract (<https://www.aapathways.com.au/about/apprenticeship-traineeship-training>)
- Statement from school principal outlining the reasons for supporting this application.
- Documentation to support this application, which may include but is not limited to psychologist reports and other referring practitioner reports

Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed

Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.

Part J: Exemption from enrolment at school due to Special Circumstances: The student has completed Year 9 and is seeking approval to complete the equivalent of Year 10 at TAFE

This part is to be completed by the applicant's parent(s)/caregiver(s)

| TAFE details | |
|--|--------|
| Name: | |
| Contact: | |
| Address: | |
| Email: | Phone: |
| Details of exemption | |
| Current age of the student: | |
| Date at which the student turns 17: | |
| Proposed date of student's last school day: | |
| Proposed commencement date at TAFE: | |
| Attachments: <ul style="list-style-type: none"> • Statement from school principal outlining the reasons for supporting this application. • Documentation to support this application, which may include but is not limited to psychologist reports and other referring practitioner reports | |
| Notes: the following applies in the case where the student has not completed Year 10 and is applying to complete the equivalent of Year 10 at TAFE: <ul style="list-style-type: none"> • the student MUST remain enrolled at the school until written confirmation of enrolment in the respective TAFE course is obtained • the student must be 15 years of age • the school must provide TAFE with a letter from the school or the careers counsellor, on school letter head, that supports the student's application • the school must inform CSBB Wellbeing and Attendance Officer of the case • if the enrolment application to TAFE is successful, the student's parents/carers must provide the school with written evidence of TAFE's confirmation of enrolment. | |
| Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed | |
| Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal. | |

Part K: Exemption from enrolment at school due to Special Circumstances: The student has completed Year 10 and cannot complete the equivalent of secondary education by any other means set out in Part 5 (21B) of the NSW Education Act

This part is to be completed by the applicant's parent(s)/caregiver(s)

Details of exemption

Date at which the student turns 17:

Proposed date of student's last school day:

Details of exemption

Student has fulfilled the requirements for the award Record of School Achievement (RoSA)

Yes

No

Attachments:

- Statement from school principal outlining the reasons for supporting this application.
- Documentation to support this application, which may include but is not limited to psychologist reports and other referring practitioner reports

Use this space to provide additional details about the reason for the Application for Exemption: Attach additional pages if needed

Complete Part L (declaration) and forward completed document and accompanying documentation to the school principal.

Part L: Parent/Carer Declaration and Details

| Parent/Caregiver Details | |
|--------------------------|----------------|
| Family name: | Given name(s): |
| Address: | |
| Relationship to student: | |
| Phone: | Email: |

Declaration and Signature

As the parent/caregiver of the above mentioned student, I hereby apply for a Certificate of Exemption from Enrolment at School, under the [NSW Education Act 1990](#).

I understand that, if the exemption is granted:

- I am responsible for the supervision of the student 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
- the absence code 'M' will be recorded in the attendance roll for the time at which this Exemption applies (as applicable to the relevant situation); the days for which this code is recorded will not be counted in the absence returns.

I declare that 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

Date

Privacy Statement

The information provided will be used to process the student's Application for an Exemption from the requirement to enrol at and/or attend school. 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
- 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.

Notes:

- The information will be stored securely.
- You may access or correct any personal information by contacting the school.
- If you have any concerns or complaints about the way your personal information has been collected, used or disclosed, please contact the school.

Forward this declaration to the school principal

Part M: Principal's decision/recommendation

Notes: Refer to page 2 'Power to grant exemptions'

- a) A **decision** can be made under the principal's delegation for granting exemptions (see Power to Grant Exemptions, page 2)
- b) A **recommendation** can be made in all other situations not covered in (a). The recommendation is made to CSBB Wellbeing & Attendance officer.

| | | |
|--|--|---|
| This decision/recommendation pertains to: | <input type="checkbox"/> Exemption from attendance | <input type="checkbox"/> Exemption from enrolment |
| Principal's Details | | |
| Name: | | |
| Phone: | Email: | |
| The circumstances, conditions and implications of the exemption have been discussed fully with the student and they agree to the terms of the exemption | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| The circumstances, conditions and implications of the exemption have been discussed fully with the parents/carers and they agree to the terms of the exemption | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Principal's decision/recommendation | | |
| Determination of this decision has been informed with the advice of CSBB | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Following consideration of this application, I am satisfied that conditions making it necessary and/or desirable for: | exist <input type="checkbox"/> | do not exist <input type="checkbox"/> |
| _____ to be exempt from school. | | |
| <i>Name of student</i> | | |
| Exemption is herewith* | Granted <input type="checkbox"/> | Not granted <input type="checkbox"/> |
| <small>* The principal is either determining whether the application is granted or not granted (within the principal's remit) OR making a recommendation to grant the exemption to CSBB Wellbeing & Attendance officer</small> | | |
| For the period | from | to |
| | | no. of school days: |

Principal's Signature

Signature

Date

Complete the Certificate of Exemption (B2) if the exemption is granted through the Principal's delegation. In all other cases, forward this application to CSBB Wellbeing & Attendance officer.

If this application relates to participation in elite arts/sports, ensure the principal's checklist (B4) is completed and attached to this application.

If this application relates to the completion of secondary education through an apprenticeship/traineeship, ensure that the relevant principal's checklist (B5a, B5b, B5c) is completed and attached to this decision.

Part N: CSBB Wellbeing and Attendance Officer's recommendation

Notes: Refer to page 2 'Power to grant exemptions'

A **recommendation** is made by CSBB Wellbeing and Attendance Officer to the respective delegate (either the Director of Schools or the School's Consultant).

| | | |
|---|--|---|
| This recommendation pertains to: | <input type="checkbox"/> Exemption from attendance | <input type="checkbox"/> Exemption from enrolment |
|---|--|---|

CSBB Wellbeing & Attendance Officer's Details

| | |
|-------|-----------|
| Name: | Position: |
| Phone | Email: |

CSBB Wellbeing & Attendance Officer recommendation

Determination of this decision has been informed in consultation with key CSBB personnel Yes No

Following consideration of this application, I am satisfied that conditions making it necessary and/or desirable for: exist do not exist

..... to be exempt from school.
Name of student

I recommend that the Certificate of Exemption be: Granted Not Granted

Reasons for recommendation not to grant a Certificate of Exemption

| |
|--|
| |
|--|

Suggested conditions applying to the recommendation to grant a Certificate of Exemption

| |
|--|
| |
|--|

CSBB Wellbeing & Attendance Officer Signature

.....
Signature

.....
Date

Forward this recommendation to the Director of Schools or to the School Consultant as applicable for the particular circumstance

Part O: School Consultant's decision

Notes: Refer to page 2 'Power to grant exemptions'
A **decision** can be made within the School Consultant's remit

School Consultant's decision

This decision pertains to Exemption from Attendance

Following consideration of this application, I am satisfied not satisfied , that conditions making it necessary and/or desirable for:

to be exempt from school.

Name of student

School Consultant's Details

Name:

Contact Tel:

Email:

Complete the Certificate of Exemption (B2) if the exemption is granted through the School Consultant's delegation and return to the CSO Attendance and Wellbeing Officer.

Part P: Director's decision/recommendation

Notes: Refer to page 2 'Power to grant exemptions'

- a) A **decision** can be made within the Director's remit
- b) A **recommendation** is made in all other situations not covered in (a). The recommendation is made to the Minister of Education.

| | | |
|--|--|---|
| This Decision/Recommendation pertains to: | <input type="checkbox"/> Exemption from attendance | <input type="checkbox"/> Exemption from enrolment |
| Director's Decision/Recommendation* | | |
| * The Director is either determining whether the application is granted or not granted (within the Director's remit) OR making a recommendation to the Minister for Education to grant the exemption | | |
| Following consideration of this application, I am satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> , that conditions making it necessary and/or desirable for: | | |
| to be exempt from school. | | |
| Name of student | | |

| | |
|---------------------------|--------------|
| Director's Details | |
| Name: | Contact Tel: |
| Email: | |

| |
|-----------------------------|
| Director's Signature |
|-----------------------------|

Signature

Date

Complete the Certificate of Exemption (B2) if the exemption is granted through the Director's delegation. In all other cases, forward this application to CSNSW.

Part Q: Minister's decision

| Minister's Decision | | |
|---|--|---|
| This Decision pertains to: | <input type="checkbox"/> Exemption from attendance | <input type="checkbox"/> Exemption from enrolment |
| <p>Following consideration of this application, I am satisfied <input type="checkbox"/> not satisfied <input type="checkbox"/> that conditions making it necessary and/or desirable for:</p> <p style="text-align: right;">to be exempt from school.</p> <p style="text-align: center;">.....</p> <p style="text-align: center;"><i>Name of student</i></p> | | |

| Delegate's Details | |
|--------------------|-----------|
| Name: | Position: |
| Agency: | |
| Contact Tel: | Email: |

| Delegate's Signature |
|----------------------|
|----------------------|

.....

Signature

Date

**Forward this application to the Director of Schools
Director of Schools (or delegate) to complete the Certificate of Exemption (Form B2) if the exemption is granted.**