

### Full / Partial Day School Absence

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

Student Name: \_\_\_\_\_

Year: \_\_\_\_\_

Learning Circle / Class: \_\_\_\_\_

Date of Absence: \_\_\_\_\_

Whole day absence

Partial absence

Arrival time: \_\_\_\_\_

Departure time: \_\_\_\_\_

Parent Explanation for Full Day or Partial Absence

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parents Name: \_\_\_\_\_

Parents Signature: \_\_\_\_\_

#### Office Use Only

- Misadventure or unforeseen event
- Participation in special events not related to the school
- Domestic necessity such as serious illness of an immediate family member
- Attendance at a funeral
- Recognised religious festival or ceremonial occasion
- Specialist Appointment
- Illness (please attach a doctors certificate if provided by your Medical Practitioner)
- Domestic & International Travel

(The College Principal is required to authorize this absence. A Notification of Exemption from Attendance at School form is required to be completed and submitted – this can be downloaded from our website under Permission Notes and Forms or collected from the Administration Office).

Entered Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_



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*“Educating our children today to nurture in them hope, courage and the capacity to be Christian leaders of tomorrow.”*