

Application for Exemption from Enrolment at Carinya To be completed by the student's parents

Student Details

Student Details

Family name: _____ Given name(s): _____

Age: _____ Date of birth: ____ (dd) / ____ (mm) / ____ (year)

Enrolment Registration Number (ERN): _____

Address: _____

_____ Postcode: _____

Date of exemption applied for: ____ / ____ / ____ to: ____ / ____ / ____

Number of school days: _____

Reason for application for exemption:

Please tick:

- Age, where a child turns six years in October or later in a school year and is engaged in full time preschool education at an accredited preschool for the remainder of the school year.
- Participation in full or part-time accredited preschool programs for students with disabilities leading to enrolment and full time attendance at a government or registered non-government school not later than six months after the child's sixth birthday.
- The health or disability of a child necessitating the continuation of an individual program supported by medical specialists not longer than six months after the child's sixth birthday.
- Participation in a full time apprenticeship or traineeship.

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.



Carinya

CHRISTIAN SCHOOL
From Christ and For Him

TAMWORTH

25 Boronia Drive, Tamworth NSW 2340
Ph: (02) 6762 0970 | E: admin@carinya.nsw.edu.au

GUNNEDAH

46 Elgin Street, Gunnedah NSW 2380
Ph: (02) 6742 2766 | E: gunnedah@carinya.nsw.edu.au

DETAILS OF PRIOR/CURRENT EXEMPTIONS (if applicable)

Date of prior/current exemption from: ____ / ____ / ____ to: ____ / ____ / ____

Number of school days: ____

Copy of Certificate of Exemption attached: (Please tick one box) Yes No

PARENT DETAILS

Family name: _____ Given name(s): _____

Address: _____

_____ Postcode: _____

Telephone number: _____ Relationship to student: _____

As the parent of the above mentioned student, I hereby apply for a Certificate of Exemption from enrolment 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: ____ / ____ / ____

PRIVACY STATEMENT

Carinya Christian School is subject to the Privacy and Personal Information Protection Act 1998. The information that you provide will be used to process your child's application for an exemption from the requirement to enrol at and/or attend school.

It will only be used or 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.

The information will be stored securely. You may access or correct any personal information by contacting the school. If you have a concern or complaint about the way your personal information has been collected, used, or disclosed, you should contact the school.

