PARENT NOTIFICATION OF EXTENDED STUDENT ABSENCE IN TERM

Student Information

- **Student Name:** _____ **Room:** _____
- **Student Name:** _____ **Room:** _____
- **Student Name:** _____ **Room:** _____
- **Student Name:** _____ **Room:** _____

Absence Details

- **Absence Dates:** From _____ To _____
- **Reason for Absence:** _____

Acknowledgment and Declaration

Thank you for notifying the school about your planned in-term absence. Please note:

- This absence will be recorded as an **Unauthorised Vacation** unless exceptional circumstances are demonstrated.
- If you believe you have exceptional circumstances, please tick the box below to arrange an appointment.

[ ] **Appointment Required**

By completing this form, you confirm that you have been advised that this absence may be recorded as an unauthorised vacation.

Parent/Carer(s) Name: _____
Signature: _____
Date: _____

School Use Only

The Principal acknowledges this notification and authorises this absence in the following category for the above student:

[ ] **Authorised Vacation** [ ] **Unauthorised Vacation**
Attendance Code: [ ] V - Vacation [ ] K - Unauthorised Vacation

Principal's Signature: _____
Date: _____