Application for Exemption from Attendance at School
For Employment in the Entertainment Industry

(More than 50 days in a 12-month period)

Where the exemption period requested exceeds 50 school days in a 12-month period,
Parts A, B and C are to be forwarded to the investigating officer nominated by the Catholic
Education Office who will make a recommendation to NSW CEC.

INFORMATION

EDUCATIONAL PROGRAM

1. Appropriate, regular and efficient instruction must be provided for all applicants approved under
   this section.
2. The tutor must consult with the principal of the school at which the student is enrolled in the
   planning and development of the educational program for that student.
3. The educational program must be compatible with the program being undertaken at the student's
   school. It must be suitable for the age, maturity and ability of the student.
4. The educational program should be comprehensive, balanced and sequential.
5. There should be sufficient print and non-print resources to meet the demands of the program.

TUTORS

1. Tutors must provide evidence that they hold appropriate teaching qualifications recognised by the
   Diocesan office (eg Bachelor of Education, Diploma of Teaching/ Education).
2. The efficiency of tutors and effectiveness of their instruction may be assessed by the investigating
   officer during visits to the place of employment.

PERIODS OF INSTRUCTION

1. Sufficient hours of instruction must be provided to ensure that the requirements of the
   teaching/learning program are being met. In general, there should be a minimum of 2 hours and an
   average of 4 hours instruction each school day.
2. Where possible, disjointed tutoring should be avoided.
3. Instruction shall only occur between 7:00 am and 7:00 pm on school days.
4. Instruction shall not occur during weekends or school holidays.
5. The tutor must ensure that adequate meal and rest breaks are provided during the period of
   instruction.

PLACES OF INSTRUCTION

1. A suitable area with adequate lighting, ventilation and space must be provided for instruction.
2. Furnishings should be suitable for the purpose of instruction.
3. During periods of instruction, this area is to be for the exclusive use of the student or other
   students away from distraction.

RECORDS

1. The tutor must complete a register of daily activities. It will include details of:
   - instruction taken from the educational program
   - the days on which instruction occurred
   - the length of the instruction periods.
2. The register must be available for inspection when requested by an investigating officer.
3. The tutor must evaluate the student's progress regularly and maintain appropriate records.
4. All records of the student's study, educational progress and actual work must be provided to the
   student's school at regular intervals.

A Certificate of Exemption may be cancelled at any time if any of these conditions are not being met.
Part A (to be completed by parent/caregiver)

School Details

School Name ………………………………………………………………………………………………………………………………………
Suburb ……………………………………………………………………………………………………………………………………… Tel No. ………………………………

Student Details

Family name …………………………………………………… Given name(s) ……………………………………………………………
Address …………………………………………………………………………………………………………………………………………………
................................................................................................................................................................................... Postcode …………………
Date of Birth: _____ / _____ / ______ Age: ........ Enrolment Registration Number *: …………………………………

* School to provide

Application for Exemption

Dates of exemption applied for: From _____ / _____ / _____ to _____ / _____ / _____ Number of school days ..............

Details of event
................................................................................................................................................................................................ ..................

Are there any prior or current exemptions? No ☐ Yes ☐ Please provide details below

Dates of prior/current exemption from _____ / _____ / _____ to _____ / _____ / _____ Number of school days ............

Is copy of prior/current Certificate of Exemption attached? Yes ☐ No ☐
Parent / Caregiver Details

Family name  ..........................................................................  Given name(s)  ................................ ......................................

Address  ...................................................................................................................................................................................  

..................................................................................................................................   Postcode ...........................

Contact Telephone   …………………………   Relationship to student   ……………………………………………………..

Declaration / Signature

As the parent/caregiver 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 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.

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 of applicant/s:  ……………………………………………………….   Date  ____ / ____ / ______

Privacy Statement

The information that you provide 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.

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.

Once you have completed and signed Part A please arrange for the employer complete Part B.
Part B (to be completed by the Employer)

Employer’s Details

Name of Company/Corporation

Contact person

Address

Contact Tel

Reason for Application for Exemption

Attachments

- Detailed itinerary/work schedule for the period of exemption sought
- Evidence of tutor’s teaching qualifications supplied by employer
- Evidence that the tutor meets child protection requirements

Employer’s Signature

Date...

Once Part B has been completed and signed please send this form to the principal of the student’s school.

Part C (to be completed by the Principal)

Principal’s Details

Name

Contact Tel

Principal’s Recommendation

The tutor has consulted the school in the planning and development of this student’s education program

I recommend that a Certificate of Exemption be granted to

(Name of Student)

for the period from to No. of school days

Comments

Principal’s Signature

Date...
Part D  (to be completed by the Investigating Officer nominated by the Catholic Education Office)

<table>
<thead>
<tr>
<th>Investigating Officer’s Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name .......................................................</td>
</tr>
<tr>
<td>Contact Tel ..............................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investigating Officer’s Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Following consideration of this application, I am satisfied that conditions:</td>
</tr>
<tr>
<td>exist  ☐ / do not exist  ☐ making it necessary and/or desirable for</td>
</tr>
<tr>
<td>(Name of student) .......................... to be exempted from attendance at school.</td>
</tr>
<tr>
<td>I recommend that a Certificate of Exemption be  granted  ☐ declined  ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reasons for recommendation not to grant a Certificate of Exemption</th>
</tr>
</thead>
<tbody>
<tr>
<td>..................................................................................................</td>
</tr>
<tr>
<td>..................................................................................................</td>
</tr>
<tr>
<td>..................................................................................................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Suggested conditions applying to the recommendation to grant a Certificate of Exemption</th>
</tr>
</thead>
<tbody>
<tr>
<td>..................................................................................................</td>
</tr>
<tr>
<td>..................................................................................................</td>
</tr>
<tr>
<td>..................................................................................................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investigating Officer’s Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>.............................................</td>
</tr>
</tbody>
</table>

Part E  (to be completed by the Delegate)

<table>
<thead>
<tr>
<th>Delegate’s Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Following consideration of this application, I am satisfied that conditions</td>
</tr>
<tr>
<td>exist  ☐ / do not exist  ☐ making it necessary and/or desirable for</td>
</tr>
<tr>
<td>(Name of student) .......................... to be exempted from attendance at school.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Delegate’s Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name ..........................</td>
</tr>
<tr>
<td>Contact Tel ..................</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Delegate’s Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>.............................................</td>
</tr>
</tbody>
</table>

| Date Applicant notified  .................................................... |