



*Respect. Excellence. Acceptance. Community. Honesty.*

## ON-SITE ATTENDANCE FORM

Student/s name:																			
Student/s date of birth:																			
Student/s year level:																			
Which exemption are you claiming?	<p>A. Essential worker/parents cannot work from home</p> <p>B. Vulnerable or Out of Home Care</p>																		
<p><i>The Victorian Government has stated that all students who <b>can</b> learn from home <b>must</b> learn from home.</i></p>	<p>I am requesting that my child/ren attend on-site schooling because my child/ren is/are not able to be supervised at home and no other arrangements can be made.</p> <p>By submitting this form, I declare that my child/ren is/are well and I will collect my child/ren as soon as is practicable upon the request of the school if my child becomes unwell.</p>																		
<p>Dates required:</p> <p>Please note you need to complete this process weekly to ensure adequate staffing on-site.</p>	<table border="1"> <thead> <tr> <th>Day</th> <th>Date</th> <th>AM, PM or ALL DAY</th> </tr> </thead> <tbody> <tr> <td>Monday</td> <td></td> <td></td> </tr> <tr> <td>Tuesday</td> <td></td> <td></td> </tr> <tr> <td>Wednesday</td> <td></td> <td></td> </tr> <tr> <td>Thursday</td> <td></td> <td></td> </tr> <tr> <td>Friday</td> <td></td> <td></td> </tr> </tbody> </table>	Day	Date	AM, PM or ALL DAY	Monday			Tuesday			Wednesday			Thursday			Friday		
	Day	Date	AM, PM or ALL DAY																
	Monday																		
	Tuesday																		
	Wednesday																		
	Thursday																		
Friday																			
Emergency contact details:																			

Parent/Guardian name:

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Signature:

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Date:

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Received and Processed by..... on (date).....