

Application for exemption from compulsory school enrolment Non-Government School

Relevant legislation

- Under section 11 of the *School Education Act 1999*, the Minister may exempt a child from compulsory education if the Minister is satisfied it is in the best interests of the child to do so.
- Under section 11(6) of the Act, the Minister has delegated power to exempt children enrolled at nongovernment schools to the Director General of the Department of Education.
- An exemption may be granted subject to conditions specified in the exemption approval letter and the exemption may be revoked at any time.

Submission

Completed form and relevant attachments can be forwarded to <u>NGSRegulation@education.wa.edu.au</u>, and mailed to:

Department of Education, Non-Government School Regulation, 151 Royal St, EAST PERTH WA 6004.

Enquiries

T: (08) 9441 1900 E: <u>NGSRegulation@education.wa.edu.au</u>

1. APPLICANT DETAILS

Relationship to	o child (e.g. Par	ent, Guardian)					
Title	Mr	Mrs	Mis	s 🗌	Ms 🗌		Other
Full Name							
Address							
Suburb				State		Postcode	
Email				Mobile			
I hereby apply for the child, whose details are given below, to be exempt from compulsory education under section 11 of the <i>School Education Act 1999</i> and agree to advise the Department of Education should these details change.							
Signature					Date		

2. STUDENT DETAILS

Full Name(s)							
Date of birth (dd/mm/yyyy)	//		-	Gender	Male / Female		
Address							
Suburb				State		Postcode	
Email				Mobile			
School at which enrolled	currently			·			
Year level to be exempt							

3. REASON FOR SEEKING EXEMPTION AND REQUIRED RELEVANT ATTACHMENTS

Undertaking a full-time course at a TAFE [attach a copy of completed enrolment form]Image: Completed apprentices apprenting organisation/University/higher education institution/Community Based Course [attach a copy of completed enrolment form]Image: Complete apprentices apprention approved course [attach a copy of completed enrolment form]Undertaking full-time employment [complete section 5]Image: Course approved options (please detail below) [attached copies of supporting documentation and/or complete section 5, if applicable]Image: Course apprentices approved apprenting documents, medical/psychological reports approved apprenting approved apprenting approved apprenting documents, medical/psychological reports apprenting a

4. PROPOSED COMMENCEMENT DATE FOR EXEMPTION ____/___/___/

5. EMPLOYER DETAILS (if applicable)

Business nan Name	ne/					
Address						
Suburb		State	Postcode			
Contact person		Telephone number	Telephone number			
Nature of employment		Hours per week child is to be employed				
Signature of employer		Date	//			

6. SCHOOL RECOMMENDATION AND COMMENTS (section must be completed by SCHOOL PRINCIPAL)

				_		
Name of Principal						
Signature of Principal		Date	//			
Department's internal use only						
Not approved or	Approved from (Date of Exemption)		/ /			
Signature of Director General		Date	/ /			