

# 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	/ /			