



# Hunter School *of the Performing Arts*

Phone: (02) 4952 3355 Fax: (02) 4956 2428

## APPLICATION FOR LEAVE on WEDNESDAY "pm" 2019

NAME \_\_\_\_\_ YR \_\_\_\_\_ STUDENT MOBILE \_\_\_\_\_

ADDRESS \_\_\_\_\_

PARENT/S NAME \_\_\_\_\_ PH \_\_\_\_\_

### IMPORTANT NOTICE TO PARENTS and STUDENTS

1. Performing Arts programs/commitments (physical work) which have been APPROVED by the Principal or Deputy Principal in place of sport on Wednesday afternoons only from 12.55pm.
2. NOTE\* A statement on a business letterhead from the program provider confirming participation and lesson times must be attached to be considered.

APPLICATION for leave Wednesday \_\_\_\_\_ (time 12.55 and onwards)

#### 1. PERFORMING ARTS PROGRAM DETAILS

Name of Program \_\_\_\_\_

Proprietor's Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Lesson/program times \_\_\_\_\_

2. MEDICAL\* Please provide details of medical condition and attach a current Medical Certificate.

REASON \_\_\_\_\_

**IMPORTANT** To ensure that minimal disruptions occur to valuable learning times please only apply if it is essential.

Consent I/We confirm the above leave times are ESSENTIAL on this day.

PARENT /GARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

(Office use only) Principal approval \_\_\_\_\_ DATE \_\_\_\_\_