#

# on-site attendance Application form

**\*This form must be returned to** **greater.shepparton.sc@edumail.vic.gov.au**

**by Wednesday 20th May.**

You will be notified of your application’s success or otherwise

by Friday 22nd May (close of business).

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| --- | --- |
|  |  |
| Student/s name:  | Click or tap here to enter text. |
| Student/s date of birth:  | Click or tap here to enter text. |
| Student/s year level:  | Click or tap here to enter text. |
| *The Victorian Government has stated that all students who* ***can*** *learn from home* ***must*** *learn from home.* | 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. 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. |
| Dates required: **For the week commencing Monday 25th May****\*Please note you need to complete this process weekly to ensure adequate staffing on-site.** |

|  |  |  |
| --- | --- | --- |
| Day | Date | AM, PM or ALL DAY |
| Monday | 25.05.2020 | Student Free Day |
| Tuesday | 26.05.2020 | Choose an item. |
| Wednesday | 27.05.2020 | Choose an item. |
| Thursday | 28.05.2020 | Choose an item. |
| Friday | 29.05.2020 | Choose an item. |

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| **Reason for on-site attendance (must be filled in):**Click or tap here to enter text. |
| Emergency contact details:Click or tap here to enter text. |  |
| Parent/Guardian name: Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: Click or tap here to enter text. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Families will be required to complete an application each week.

If you are an essential worker, please provide statement from employer or a copy of roster.

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