



## STAGE 5 Year 10 APPLICATION FOR EXEMPTION FROM SCHOOL CAMP 2021

To be completed by a parent or guardian for a student applying to be exempted from School Camp. Supporting documentation is to be provided with this application. Example: Medical Certificate.

STUDENT'S SURNAME:..... GIVEN NAMES:.....

YEAR GROUP CAMP: ..... MENTOR:.....

DATES FOR EXEMPTION:...../...../.....to...../...../..... Number of Days:.....

REASONS FOR EXEMPTION: SUPPORTING DOCUMENTATION ATTACHED: YES ☐ NO ☐

### PARENT /GUARDIAN DETAILS:

SURNAME:.....GIVEN NAME:.....

ADDRESS:.....

CONTACT NUMBER:.....RELATIONSHIP TO STUDENT:.....

### DECLARATION:

As the parent/guardian of the above named student I apply for exemption from School Camp. I understand that upon leave being granted that

- I am responsible for the supervision of the student during the period of leave.
- The leave is limited to the period approved.

Signature of Parent / Guardian:..... Date:...../...../.....

### OFFICE USE ONLY:

APPLICATION APPROVED

Yes ☐ No ☐

If no, give reason:

Tom Waterhouse  
Director of Student Development  
Stage 5

Signature

APPLICATION APPROVED

Yes ☐ No ☐

If no, give reason:

Elizabeth Ruff  
Head of Knox Middle Academy

Signature

APPLICATION APPROVED

Yes ☐ No ☐

If no, give reason:

Phil O'Regan  
Deputy Headmaster, 7-12 Students

Signature