



KANANOOK PRIMARY SCHOOL ON-SITE ATTENDANCE FORM

Student/s name:			
Student/s date of birth:			
Student/s year level:			
<p><i>The Victorian Government has stated that all students who can learn from home must learn from home.</i></p>	<p>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.</p> <p>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.</p>		
Dates required:	Day	Date	AM, PM or ALL DAY
<p>Please note you need to complete this process weekly to ensure adequate staffing on-site.</p> <p>Important: To assist us with staff planning, please complete and return this form by close of business the Thursday prior to the week when on-site attendance is required.</p>	Monday		
	Tuesday		
	Wednesday		
	Thursday		
	Friday		
Emergency contact details:	<p>Parent name: Mobile number:</p> <p>Name of Employer: Contact Number:</p>		
<p>Important: I understand that the school must be able to contact me at work if they are unable to contact me on my mobile. If my child becomes ill, and for some reason I cannot be contacted, I have provided my employer's details.</p>			
Parent/Guardian name:	_____		
Signature:	_____		
Date:	_____		

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