



St. Philip's Christian College Gilibaa

**Attendance and Absenteeism Procedures
Procedure for daily attendance recording:**

1. Teachers to mark Pastoral Care (PC) rolls by 09:10am each morning on TassWeb. Absences are noted on Tassweb utilising the approved common code. The start of our school specific codes relate to the approved common code.

Absentee Reasons	
CODE	DESCRIPTION
L	Accepted by the Principal
BAL	Approved Leave (On Campus)
H	Attend another EDU Institute
LBL	Bereavement
ABT	Bus Train Delay (Pa)
HDE	Distance Education
ACV	Elected Self-isolation
MCV	Exempt – Covid-19
M	Exempted from attending school
X	First/Last Day – DO NOT USE
ANN	No Note (Pa)
B	Official School Business
APN	Parent Note
FRL	Remote Learning Off-site
FCV	Required self-isolation
S	Sickness/medical reason
T	Student Late to Class
F	Study Leave
E	Suspended from school
FTF	TAFE
HTF	Tafe (Pre 2015)
TKS	TK5 Default Reason
A	Truant – unexplained aft. 7 Days
AUN	Unexplained
BWE	Work Experience
BWP	Work Placement

2. All notes collected by class teachers should be forwarded to the School Secretary by 9:10am each morning. Attendance is then updated into TassWebb.
3. The School Secretary check rolls are marked and follow up with teachers if rolls not marked. The Receptionist will at times support this function in the absence of a School Secretary.
4. The School Secretary sends SMS to the parent. This SMS is recorded against each student on TassWeb.
5. Parent replies are also recorded on TassWeb

Procedure for Late Arrivals to School

The student must sign in at the Administration Office, where a late note will be given to the student to hand to their teacher when they arrive at class. Late arrivals to school are annotated by the Administration staff on TassWeb.

Procedure for Early Departures from School

The School Secretary or classroom teacher should receive communication from the student's parent/guardian explaining this. The student will report to the Administration staff to be collected by a parent / guardian. Early departures from school are annotated by the Administration staff on TassWeb.

Procedure for Extended Leave from School – Appendix 1

The families download and complete the form from the SPCC PS website;
APPLICATION FOR EXTENDED LEAVE – MEDICAL / VACATION / TRAVEL

It is then given to the person on the front desk to be passed on to the Principal.

The Principal reviews the form and makes the determination whether to grant or deny the leave. The families are advised of the decision by mail with a certificate of Extended Leave signed by the Principal or Delegate. If there are any queries the family will be contacted by phone and/or email.

Procedure for Exemption from Enrolment at School – Appendix 2

The families download and complete the form from the SPCC PS website;
APPLICATION FOR Exemption from Enrolment at School Form

The Principal meets with the families to receive the form and discuss the reasons for the exemption. The Principal reviews the form and makes the determination whether to grant or deny the leave. The families are advised of the decision by mail with a certificate of Extended Leave signed by the Principal or Delegate. If there are any queries the family will be contacted by phone and/or email.

Teachers Procedure for dealing with absence:

1. Pastoral Care teachers to monitor student attendance and follow through on any additional contact that they need to make with parents / guardians as necessary.
2. Pastoral Care teachers to notify the Aboriginal School Coordinator of any student identified with chronic absences.

Procedure for follow up chronic absences

1. At the end of each term and or semester the School Secretary email Exception Report to Aboriginal School Coordinator to check for chronic absences. Example below:



SPCC - Port Stephens EXCEPTION REPORT

02/03/2017 10:47 AM
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Absence report for date range 06/02/2017 to 10/02/2017

Student Code	Student Name	Class	Brd	House	PC Tut Group	Absent School	Absent Am	Absent Pm	Late For School	Early Depart	Absent Lesson	Absent Part Day	Other
201508		11	N	FI	11FS				2				
201637		10	N	FI	10AP				2				
200170		12	N	KI	12PM				3		3		1
200223		12	N	FI	12DM						2		
202094		9	N	FI	9RB	3							
200353		10	N	KI	10EW	2							
201886		9	N	KI	9ML	4							

2. The School Secretary to send a letter to parents as requested by the Aboriginal School Coordinator outlining any concerning absences.
3. Aboriginal School Coordinator to notify Principal if chronic absence exists (30 days out of 100).
4. Aboriginal School Coordinator in cooperation with the Principal to organise conference with parents to formulate an attendance plan or health plan where necessary. (Chronic absence 30 days out of 100).
5. Where deemed necessary, the Department of Communities and Justice are notified.

Appendix I

ST PHILIP'S CHRISTIAN COLLEGE GILIBAA

APPLICATION FOR EXTENDED LEAVE – MEDICAL / VACATION / TRAVEL

NOTE: PART A is to be **completed by the student's parent** and returned to their child's school principal.

PART A: STUDENT DETAILS

Please complete table below with details of all students associated with the period of leave:

FAMILY NAME	GIVEN NAME	DOB	AGE	GRADE	SRN

Student address: _____ Postcode: _____

School name: **St Philip's Christian College – GILIBAA**

Dates of extended leave applied for: From: ___ / ___ / ___ to ___ / ___ / ___

Number of school days: _____

Reason for leave:

Destination (if travel):

Relevant travel documentation such as an e-ticket or itinerary (in the case of non-flight bound travel within Australia only) must be attached to this application.

PART A: DETAILS OF PRIOR EXEMPTIONS/ EXTENDED LEAVE – VACATION/ TRAVEL (if applicable)

Date of prior exemption/extended leave: From: ___ / ___ / ___ to ___ / ___ / ___

Number of school days: _____

Copy of Certification of Exemption/Extended Leave – Travel attached (Please tick) Yes No

ST PHILIP'S CHRISTIAN COLLEGE GILIBAA

APPLICATION FOR EXTENDED LEAVE – MEDICAL / VACATION / TRAVEL

PARENT DETAILS (Applicant)

Family name: _____ Given Name: _____

Address: _____ Postcode: _____

Telephone number: _____ Relationship to student: _____

As the parent and applicant, I hereby apply for a *Certificate of Extended Leave-Vacation/ Travel* and understand my child will be granted a period of extended leave upon acceptance by the principal of the reason provided.

I understand that if the application is accepted:

— I am responsible for his/her supervision during the period of extended leave

— The provided period of extended leave is limited to the period indicated

— The provided period of extended leave is subject to the conditions listed on the *Certificate of Extended Leave-Medical / Vacation/ Travel*

— The period of extended leave will count towards my child's absences from school

I declare the information provided in this application is to the best of my knowledge and belief; accurate and complete. I recognise that should statements in this application later prove to be false or misleading any decision made as a result of this application may be reversed. I further recognise that a failure to comply with any condition set out in the *Application for Extended Leave- Vacation/ Travel* may result in the provided period of extended leave being cancelled.

Signature of parent/s: __ Date: __ / ____ / _____

Appendix 2

ST PHILIP'S CHRISTIAN COLLEGE GILIBAA

Application for Exemption from Enrolment at School

To be completed by the student's parents

Student Details

Family name: _____ Given name(s): _____

Age: _____ Date of birth: _____ (dd) / _____ (mm) / _____ (year)

Enrolment Registration Number (ERN): _____

Address: _____

_____ Postcode: _____

School name: _____

Date of exemption applied for: _____ / _____ / _____ to: _____ / _____ / _____

Number of school days: _____

Reason for application for exemption:

Please tick:

Age, where a child turns six years in October or later in a school year and is engaged in full time preschool education at an accredited preschool for the remainder of the school year.

Participation in full or part-time accredited preschool programs for students with disabilities leading to enrolment and full time attendance at a government or registered non-government school not later than six months after the child's sixth birthday.

The health or disability of a child necessitating the continuation of an individual program supported by medical specialists not longer than six months after the child's sixth birthday.

Participation in a full time apprenticeship or traineeship.

Please provide more detail about the reason for the application for exemption here:

NOTE: Where the reason for application for exemption includes long term travel arrangements of more than 20 school days, copies of travel documentation should be included with the application.

DETAILS OF PRIOR/CURRENT EXEMPTIONS (if applicable)

Date of prior/current exemption from: ____ / ____ / ____ to: ____ / ____ / ____

Number of school days: _____

Copy of Certificate of Exemption attached: (Please tick one box) Yes No

PARENT DETAILS

Family name: _____ Given name(s): _____

Address: _____

_____ Postcode: _____

Telephone number: _____ Relationship to student: _____

As the parent of the above mentioned student, I hereby apply for a Certificate of Exemption from enrolment at school, under the *Education Act 1990*. I understand that if the exemption is granted:

- I am responsible for his/her supervision during the period of exemption
- the exemption is limited to the period indicated
- the exemption is subject to the conditions listed on the Certificate of Exemption
- the exemption may be cancelled at any time.

I declare the information provided in this application for a certificate of exemption is to the best of my knowledge and belief accurate and complete. I recognise that should statements in this application later prove to be false or misleading any decision made as a result of this application may be reversed. I further recognise that a failure to comply with any condition set out in the exemption may result in the exemption being revoked.

Signature of applicant/s: _____

Date: ____ / ____ / ____

INVESTIGATING OFFICER'S RECOMMENDATION

To be completed by the investigating officer nominated by the school.

RECOMMENDATION

1. Following consideration of this application I am satisfied that conditions exist/do not exist that make it necessary and/or desirable for _____ (*insert name of student*) to be exempted from enrolment at school. I recommend that a Certificate of Exemption be granted/declined. (Circle appropriate recommendation)

2. Specific reasons for recommendation not to grant a Certificate of Exemption.

3. Suggested conditions applying to recommendation to grant a Certificate of Exemption.

Investigating officer name: _____

Signature: _____

Date: ____ / ____ / ____

PRINCIPAL'S RECOMMENDATION

(Delete that which does not apply)

Following consideration of this application I am/am not satisfied that conditions exist that make it necessary and desirable that _____ (*insert name of student*) be exempted from enrolment at school.

Name and position of delegate: _____

Signature of delegate: _____

Date: ____ / ____ / ____ Notification to applicant: ____ / ____ / ____

Note: Please complete the Certificate of Exemption from Enrolment at School if exemption is granted.