



St Matthew's Collegiate School

REQUEST FOR SPECIAL LEAVE

(At least two weeks notice required)

Name:		Year Level / Class:	
		Day Girl / Boarder (please circle one)	
Reason for Leave:		Dates absent from School:	
<p>* Permission is granted on the understanding that work missed will be completed * Assessment details must be negotiated with the subject teacher * NCEA guidelines are to be adhered to * Assessments for Internal Standards may have to be forfeited</p>			
Parent:			
The section below must be completed by the teacher/girl – all subjects must be listed.			
SUBJECT:	Academic Work/Assessment	Teacher Initials	Date
English			
Health			
Maths			
P.E.			
R.E.			
Science			
Social Studies			
Whanau Teacher: (Years 7-11)		Sports Co-ordinator:	
Dean: (Years 7-13)			

YOU ARE REQUIRED TO COMPLETE THIS FORM ONLY IF YOU ARE AWAY FROM SCHOOL FOR PERSONAL OR FAMILY REASONS. PLEASE GET FORM COMPLETED BY SUBJECT TEACHERS AT THE END OF A PERIOD

PROCEDURE

1. Collect form from Main Office.
2. Take home for parent's signature.
3. Parent to attach letter regarding leave requested.
4. Form completed i.e. subject teachers/sports co-ordinator.
5. Years 7 – 11 form signed by Whanau Teacher/ Years 7 – 13 form signed by Dean.
6. Return to Main Office
7. Approval of Principal (signature on reverse of this form) required after communication from Parent, Form Teacher (Years 7-10), Dean (Years 11-13) and Sports Co-ordinator

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