

## Student Details

|                        |                                  |                                    |                                  |
|------------------------|----------------------------------|------------------------------------|----------------------------------|
| Family Name:           | Given Name(s):                   |                                    |                                  |
| Student Number:        | Session Group:                   |                                    |                                  |
| Course Specialisation: | <input type="checkbox"/> Fashion | <input type="checkbox"/> Interiors | <input type="checkbox"/> Styling |

## Details of Absence

Illness  Compassionate Reasons  Appointment  Other

Details:

*Please remember to attach proof of absence when submitting form or reason for absence will not be validated*

## Teacher Authorisation (if leaving early)

Purpose of early departure:

Time of departure:

Teacher:

Signature:

### Please note:

- **All absences affect your overall attendance;** however validated absences will be taken into account when reviewing a student's academic progression
- Students are reminded to provide **proof of absence** i.e. medical certificate, compassionate leave or unavoidable appointment details or will have the leave recorded as non-approved
- It is recommended the student **retain a copy of the supporting documentation**
- **Proof of absence (such as medical certificates) are to be attached within five days of return to college.** Whitehouse reserves the right to confirm validity supporting documentation such as medical certificates and letters
- Appointments such as routine dental and medical matters should not in class hours
- This form is to be used in case of unexpected absences (i.e. illness, compassionate etc. For scheduled events in advance - use **Request for Absenteeism** - to be lodged 4 weeks prior to requested leave
- If leaving class early – sign off by teacher required.

## Student Authorisation

Student Signature:

Date:

## Office Use Only

Received by:

Date:

Updated:

Database

Filed

Date: