

## ON-SITE ATTENDANCE FORM

As part of the government's strategies, it has been made very clear that if your child **CAN** remain at home they **MUST STAY AT HOME**. This has been a clear direction from the Government through the Department of Education and Training. The school is not open in the normal sense. You have a duty of care for your child and as a member of this community to protect them and everyone else from the spread of this virus. Therefore, they **MUST** stay at home.

A Care and Supervision Program 9am-3.30pm is only available for those families of Essential Workers who cannot work from home and cannot make alternative care arrangements.

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 <b>can</b> learn from home <b>must</b> learn from home.</i></p> <p><b>Children who are unwell or have symptoms consistent with those of COVID-19 MUST NOT attend school.</b></p> <p><i>Note also that care is only offered for the days of the week where care is required.</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>																			
<p>Form for the following dates: <b>Wednesday 15<sup>th</sup> April – Friday 17<sup>th</sup> April</b></p> <p>Please note you need to complete this process weekly to ensure adequate staffing on-site.</p> <p><b><i>This form must be returned to the school by 12 noon on Tuesday 14<sup>th</sup> April so that supervision can be organised.</i></b></p> <p>Each other week, a new form needs to be received at the school by the Thursday prior by 3pm.</p>		<table border="1"> <thead> <tr> <th>Day</th> <th>Date</th> <th>AM, PM or ALL DAY</th> </tr> </thead> <tbody> <tr> <td>Monday</td> <td></td> <td></td> </tr> <tr> <td>Tuesday</td> <td></td> <td></td> </tr> <tr> <td>Wed 15th</td> <td></td> <td></td> </tr> <tr> <td>Thurs 16th</td> <td></td> <td></td> </tr> <tr> <td>Friday 17th</td> <td></td> <td></td> </tr> </tbody> </table>		Day	Date	AM, PM or ALL DAY	Monday			Tuesday			Wed 15th			Thurs 16th			Friday 17th		
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Monday																					
Tuesday																					
Wed 15th																					
Thurs 16th																					
Friday 17th																					
Emergency contact details:																					
Parent/Guardian name: _____																					
Signature: _____																					
Date: _____																					

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