



**APPLICATION FOR EXEMPTION FROM SCHOOL ENROLMENT/ATTENDANCE
AND EDUCATION ENROLMENT/PARTICIPATION
FOR ALL STUDENTS 17 YEARS AND UNDER**

The student must attend school regularly until exemption is approved.
Information provided is protected by the Government of South Australia Information Privacy Principles.
For information regarding the exemption processes see - www.decd.sa.gov.au/educationage

SECTION 1 COMPULSORY DETAIL

Name of Student (in full)		EDID	
School/Provider	Stirling North Primary School		Site No: 1481
Principal's Name	Adam Wilson		
Parent/Guardian Address			
Parent/Guardian Phone		Postcode	
Student's Date of Birth		Age	
		Gender	
		Year Level	
	GOM	<input type="checkbox"/>	ATSI
		<input type="checkbox"/>	SWD
		<input type="checkbox"/>	
Name of Parent/Guardian		Signature	

Section 1 B- Principal Recommended and DECD Central Delegate Approved

Full Time Employment
(Refer to Guidelines)

☐

Confirmation letter from Employer attached
No. of hours offered **MUST BE STATED**

<input type="checkbox"/> 30 hrs or more for 15 yr old	Start Date:				End Date:			
<input type="checkbox"/> 25 hrs or more for 16 yr old	Start Date:				End Date:			

Full Time Non DECD Education

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Full Time External Apprenticeship / Traineeship

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Copy of contract / letter of offer from Employer attached

Start Date				End Date			
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Employer Details

Employer's Name		Business Name	
Business Address			
Number of hrs offered		Phone:	
		Start Date	

PRINCIPAL – RECOMMENDED

Signature

Date

DECD – CENTRAL DELEGATE - APPROVED / NOT APPROVED (please circle)

Signature

Date

**APPLICATION FOR EXEMPTION FROM SCHOOL ENROLMENT/ATTENDANCE
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FORM A

ED 175

Updated: Oct 2014

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SECTION 2 A COMPULSORY DETAIL

Name of Student (in full)		EDID	
School/Provider	Stirling North Primary School		Site No: 1481
Principal's Name	Adam Wilson		
Parent/Guardian Address			
Parent/Guardian Phone		Postcode	
Student's Date of Birth		Age	
		Gender	
		Year Level	
	GOM	<input type="checkbox"/>	ATSI
		<input type="checkbox"/>	SWD
		<input type="checkbox"/>	
Name of Parent/Guardian		Signature	

Section 2 B – Principal Recommended and DECD Central Delegate Approved

<input type="checkbox"/>	Overseas Exchange <i>(Copy of Confirmation document to be kept at site)</i>	Destination				
		Start Date			End Date	
<input type="checkbox"/>	Family Travel – Holiday <i>(More than 12 months)</i>	Destination				
		Start Date			End Date	
<input type="checkbox"/>	Elite Sports <i>(Copy of Confirmation document to be kept at site)</i>	Destination				
		Start Date			End Date	

EXTERNAL TRAINING ☐ Enrolment form attached / Letter from RTO / Approved Learning Provider

REGISTERED TRAINING ORGANISATION (RTO) / APPROVED LEARNING PROVIDER

Name:	
Start Date	
End Date	

PRINCIPAL – RECOMMENDED

Signature

Date

DECD – CENTRAL DELEGATE APPROVED / NOT APPROVED (please circle)

Signature

Date