



RED CLIFFS SECONDARY COLLEGE

ON-SITE ATTENDANCE FORM (TERM 3)

Student/s name:																					
Student/s date of birth:																					
Student/s year level:																					
<p><i>Victorian government schools in rural and regional Victoria will commence <u>remote and flexible learning</u> from 5 August 2020 for all students enrolled in specialist schools.</i></p>	<p><input type="checkbox"/> I am requesting that my child/ren attend on-site learning because my child/ren is/are not able to be supervised at home and no other arrangements can be made as I am unable to work from home.</p> <p>OR</p> <p><input type="checkbox"/> My child identifies as vulnerable and I am requesting they attend on-site learning as they fall under this category.</p> <p>OR</p> <p><input type="checkbox"/> My child/ren has a disability* and I am requesting they attend on-site learning based on parent choice.</p> <p><small>* 'Disability' refers to all students receiving adjustments, including (but not limited to) those supported through the Program for Students with Disabilities.</small></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>Dates required:</p> <p>Please note you need to complete this process weekly to ensure adequate staffing onsite.</p>	<table border="1"> <thead> <tr> <th style="background-color: #0056b3; color: white;">Day</th> <th style="background-color: #0056b3; color: white;">Date</th> <th style="background-color: #0056b3; color: white;">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>Wednesday</td> <td></td> <td></td> </tr> <tr> <td>Thursday</td> <td></td> <td></td> </tr> <tr> <td>Friday</td> <td></td> <td></td> </tr> </tbody> </table>			Day	Date	AM, PM or ALL DAY	Monday			Tuesday			Wednesday			Thursday			Friday		
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Monday																					
Tuesday																					
Wednesday																					
Thursday																					
Friday																					
<p>Emergency contact details:</p>																					
<p>Parent/Guardian name: _____</p>																					
<p>Signature: _____ <i>(Typing name here represents signature)</i></p>																					
<p>Date: _____</p>																					

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