



# Mary MacKillop Catholic Regional College 2025 UNIFORM EXEMPTION APPLICATION

Student Name: \_\_\_\_\_ HRM: \_\_\_\_\_

Reason for applying for an exemption: (Please tick Category for exemption)

Health and Wellbeing related exceptions		
✓	Specific Exception	Suggested Documentation
	Students with a health condition	Student Health Support Plan
	Other reason	Provided to College in writing

Further information to support your application (Please complete)


Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Wellbeing Leader: \_\_\_\_\_ Date: \_\_\_\_\_

**Completed forms to be returned to Deputy Principal: Wellbeing – Students and Staff.  
Student, Parent/Guardian will then be informed if the application has been successful  
or not and the effective start date.**

## Office Use Only:

Uniform Exemption: ☐ Approved ☐ Not Approved

Deputy Principal – Wellbeing – Students and Staff: \_\_\_\_\_

Signature

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

- ☐ Communicated to student
- ☐ Communicated to parent/guardian
- ☐ Communicated to all teachers
- File in students file in office

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_