APPENDIX C APPLICATION for exemption TO FORM A COUNCIL

**Independent Public Schools are required to have a functioning board.**

**For schools that are not Independent Public Schools and wish to seek an exemption, please attach a letter which explains:**

* **why you are seeking exemption and whether any consultation has occurred; and**
* **either the way in which functions to be performed by a council can be provided by some other means; or how the school’s size or nature mean it is not necessary for the school to have a council.**

**SCHOOL:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/community representative:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REGIONAL OFFICE**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application supported: YES 🗖 NO 🗖 (Please attach statement if appropriate.)

Director of Education.

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

**LEADERSHIP INSTITUTE**

This request is consistent with the requirements of the *School Education Act 1999* and the *School Education Regulations 2000*: YES 🗖 NO 🗖

Gazettal notice attached: YES 🗖 NO 🗖

Director, Leadership Institute:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**DEPUTY DIRECTOR GENERAL, PUBLIC SCHOOLS**

Application supported: YES 🗖 NO 🗖

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**OFFICE OF THE MINISTER FOR EDUCATION**

MINISTER FOR EDUCATION Application approved: YES 🗖 NO 🗖

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

**LEADERSHIP INSTITUTE**

School Notified YES 🗖 NO 🗖

Manager System Performance notified YES 🗖 NO 🗖