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|  | Term 2, 2021, On-site Supervision Application |
| Student and class:  |  |
| Student and class: |  |
| Student and class:  |  |
| *The Victorian Government has stated that all students who* ***can*** *learn from home* ***must*** *learn from home.**By completing this application you understand the requirements and potential risks of on-site attendance.* |
| * I am requesting that my child/ren attend on-site schooling because I/we CANNOT SUPERVISE THEM AT HOME and CANNOT ARRANGE OTHER CARE due to the following reason **(please include place of work and employer details)**:
* I confirm that there is no-one working or studying from home, there is not another adult or person able to supervise the children at home / or any other arrangements can be made for my children at home on the requested days / times
* I understand that Grovedale Primary School will provide as best it can a clean, hygienic and safe learning environment for my child, however the School cannot guarantee that my child will not be susceptible to the COVID-19 virus whilst in attendance as there will be children and adults from a variety of homes present in the one location.
* I understand that my child will need to abide by all physical distancing, safety and hygiene requirements whilst in attendance, and if they do not, I WILL BE REQUIRED TO COLLECT MY CHILD IMMEDIATELY.
* 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.
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| Dates required:Please note you need to complete this process weekly to ensure adequate staffing on-site. |

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| --- | --- | --- | --- |
| Day | Date | Drop off time(after 8:45AM) | Pick-up time(before 3:20pm) |
| Monday | 31.05.21 |  |  |
| Tuesday | 01.06.21 |  |  |
| Wednesday | 02.06.21 |  |  |
| Thursday | 03.06.21 |  |  |

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| Parent/Guardian: |  | Signature: Date:  |   |
| Mobile: |  | Emergency Contact: |  |

Email to grovedale.ps@education.vic.gov.au

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