

## **Burwood Girls High School**

## **'EARLY LEAVERS' REQUEST**

STUDENT'S FAMILY NAME:	STUDENT'S FAMILY NAME:	
STUDENT'S FIRST NAME:	STUDENT'S FIRST NAME:	
YEAR: 7 8 9 10 11 12 (please circle one)	YEAR: 7 8 9 10 11 12 (pl	lease circle one
DATE:	DATE:	
LEAVING SCHOOL AT: AM / PM	LEAVING SCHOOL AT: AI	M / PM
RETURNING TO SCHOOL AT (if applicable): AM / PM	RETURNING TO SCHOOL AT (if applicable):	AM / PM
REASON:	REASON:	
SIGNED (PARENT/CARER):	SIGNED (PARENT/CARER):	
DATE:	DATE:	

## Hand this note to your Roll Call teacher.

When it is time to leave, go to the front office and collect your leave pass before exiting the school grounds.

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