

## STUDENT EXIT FORM

Date	)	Student ID	Year Level	Last Day to Attend							
Student's Full Name: Current Age: year'smonths											
Current Address:											
Contact Phone Number:											
If this student is due a refund (*please see below) on the Resource Hire Scheme I/we prefer payment											
by:											
□ C	redit siblings school	account: Name:		Year:							
				BSB:							
			ccount Name:								
*I understand that outstanding fees have been paid in full and all resources including: all textbooks, library books, musical instruments have been returned *											
Please share with us the reason for leaving Albany Creek State High School:											
REASON FOR DEPARTURE (Please tick one of the following)											
	Transferring to another school in Qld: School name:										
	Moving interstate to another school: School name:										
	□ Pursuing other interests (only if over 17 years of age)										
In Queensland, it is compulsory to attend school until the end of Year 10 or until you turn 16 years of age (which ever is earlier), unless you have been granted:											
	An exemption (application form must be completed) or										
	Flexible Learning A	ible Learning Arrangement: Institution									
	Course:										
It is also in Queensland compulsory by law, to continue in schooling until you compete Year 12 or until you turn 17 years of age, unless:  You have a job – at least 25 hours a week.  Please provide a letter of proof from your Employer and attach it to this form.  Employers name:											
	Undertaking further Institution:	training e.g. TAFE/Tertia	ry study/Private Registered	Training Organisation							
I understand the compulsory school age and compulsory participation phase conditions and agree if my child/ren's circumstances change, I must re-enrol them at a Queensland school, TAFE, Tertiary study or apply for an exemption if my child/ren has/have not turned 17 years of age or completed Year 12.											
Parent's Signature: Student's Signature:											

Office Use On	ıly)					
Office Staff	f					
1. Notify Reso	ource Hire, Li	brary and Accounts I	Receivable			
(on receipt o	of Student Exit	Form)				
				Signature	Date	
2. Principal /D						
(Student at	osences chec	ck)				
				Signature	Date	
B. Office Staff	f			Ū		
(Ensure Stu	udent absend	es and Bank Details	have been			
checked a	nd recorded,	OneSchool Exit Proc	essed,	Signature	Date	
Inform Stud	Inform Student Attendance Officer **cross name off					
Wave/Roll (	Class on phy	sical roll				
4. Resource H	lire Scheme	Co-Ordinator				
	30					
				Signature	Date	
Subject	Returned		Not Ret	urned		Parent
	(Signature)  Title of Resource					Contacted
			Replacement Co		nt Cost	
				-		
5. Library	na Loona)					
(Outstandir	ig Loans)		S	Signature		Date
	Title of	Resource		Replacement Cost		
		I				
6. Senior Sch	ooling (Years	s 10,11 and 12 only)				
QCAA Portal				Signature <b>Date</b>		
7. Accounts	Receivable			Ū		
			Sig	nature		Date
Refund of 6	<b>‡</b>	to be	_	to ACSHS Stud	ent Acco	
rtolullu Ul (	Ψ	to be		ank Account		
				ank Account eaue – No.		
				zuuc – IVO.		

Signature	Date

8. Business Services Manager