



Application for exemption

applied for			Name
1-2 days	Teacher	<input type="radio"/>	
more than 3 days	Principal	<input type="radio"/>	Mrs Berndt

I request an exemption for:

Date:	Name:	Class:
	Place:	from- to
<input type="radio"/> Consultant		
<input type="radio"/> Others	Reason:	
	
	
	
	
	
	
	
	
	

Best regards

Requested on:

Notice of approval, Teacher / Principal:

yes

no

Reason:

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Signatur: Date: