



Mount St. Bernard College

WEEKEND LEAVE APPLICATION FORM

Student/s Name: _____

Parent / Guardian Approval

Please Note: Our preferred method of applying for weekend leave is through the REACH Boarding app. which can be downloaded from the App. store for free. If you would like more details on this, please contact the Residential Administration Office on 07 4096 1504.

I/we request that my/our child be given permission for leave on the following days:

Date out: _____ Date in: _____

Time out: _____ Time in: _____

Travel details – Departure & Return (if not provided by the college): _____

To be collected from the bus/College by: _____
(Full name & phone number of the person collecting your child)

To be returned to the bus/ College by: _____
(Full name & phone number of the person returning your child)

Contact name, address & phone number of person where your child will spend their leave:

Name: _____

Address: _____

Phone Number: _____

Have you contacted the people mentioned above? Yes No (please circle)

Please note: This completed Leave Request Form must be submitted to the Residential Office by 5pm the Wednesday prior to leave being requested. A late form may result in refusal. Submission of this Leave Application Form does not guarantee the automatic approval of your child's leave.

**IN THE EVENT THAT THE HOST IS LATE PICKING UP STUDENT,
THE STUDENT WILL BE RETURNED TO COLLEGE.**

Parent/Guardian Signature: _____ Date: _____

Parent /Guardian Name: _____

Contact phone number/s: _____

Residential Email: msb.residential@cns.catholic.edu.au