



Pymble Ladies' College

PESP Extended Leave Student Checklist

To be completed and returned a week prior to departure

Name	
Connect Group	
Dates of Leave	

Curriculum

After your discussion with each teacher please ask them to sign

My subjects are:	Teacher's Name	Teacher's Signature	Buddy Organised and name
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

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Pymble Ladies' College

Sports and Activities

After your discussion with each Co-ordinator of Sport/Activity or their representative please ask them to sign

My Sports and Activities are:	S/A Co-ordinators name	S/A Co-ordinator Signature
1.		
2.		
3.		
4.		
5.		
6.		

Additional Activities

Include – Music, Orchestra, Private lessons

My Other commitments are:	Co-ordinators name	Co-ordinator Signature
1.		
2.		
3.		

WORK PLAN

Signature of Head of School _____ Date: _____
 Signature of Parent _____ Date: _____
 Signature of Student _____ Date: _____