Illness, Accident, Misadventure and Special Circumstances Application
(SC, Preliminary and HSC Courses)

Instructions

Complete this form if you:
• are applying in advance for an extension for an assessable task
• have handed in an assessable task after the due date
• were absent on the day of an assessable examination or class test

The completed form must be given to your class teacher:
• as soon as possible before the due date if you are applying for an extension
• within five school days after you return to school when absent due to illness
• within five school days of the due date of the assessment task if the task is late
Apart from exceptional cases, failure to submit the form within five days will render any excuse invalid.

SECTION A

To be completed by the student and handed to the appropriate class teacher.

Name of student: .......................................................... ...............................................................

Class teacher: ................................................................................................................................

Course (Subject): .............................................Year: ...........................................................

Due date of task: .............................................Task Name: ....................................................

Has the task been completed / handed in? YES / NO If ‘YES’, when? .........................

Was the task completed / handed in on the first day back at school? YES / NO

Nature of Application (eg extension, late submission of assignment, missed test due to illness)

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Reasons for making this request (outline your reasons in full below, or on a separate piece of paper, as they are a key consideration in whether or not your request is granted)

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I have attached supporting statements and / or a medical certificate from: .......................

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Signed (student) .......................................................... Date .........../........../.........
SECTION B

To be completed by the class teacher and handed to the appropriate Head Teacher.

Name of student: ..............................................................................................................

What % of the course is this task worth? ...........................................................................

Has the student failed to submit, or completed late, any other assessable tasks? YES / NO

If ‘yes’, how many and what % of the course do they constitute? ...........................................

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Comments and recommendations: (outline your comments / recommendations in full, as they are a key consideration in whether or not this request is granted)

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Signed (teacher): ........................................... Date …….../……../………………

SECTION C:

To be completed by the Assessment Review Committee (consisting of the Deputy Principal and Faculty Head Teacher). When completed, photocopy and give to the Deputy Principal for filing.

Decision

Please tick one of the following:

a) No penalty  b) Zero marks  c) Some penalty

% of marks deducted …………………..

Comments: .........................................................................................................................

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Final mark awarded: ….............................. Teacher informed (date) …….../……../………

Student informed (date): …….../……../………

Signed (Head Teacher / Deputy Principal)....................................................... Date …….../……../………