Preliminary HSC Illness/Misadventure Application

Name: ___________________________ Roll Class: _____ Course: ___________________________
Assessment Task: ___________________________ Date of Task: ___________________________

Reason for application (please tick):

☐ Absent 2 days before an Assessment Task
☐ Absent from or late to class 2 days before an Assessment Task
☐ Other School Commitment on the day of an Assessment Task
☐ Extension (due to illness or exceptional circumstances)
☐ Absent from Assessment Task, or absent when an Assessment Task is due (due to illness or exceptional circumstances)
☐ Special Consideration (due to Illness/Misadventure/Exceptional Circumstances leading up to an Assessment Task, or on the day of an Assessment Task).

Reasons supporting application (to be completed by the student):
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

I have attached (please tick and complete relevant information):

☐ Medical Certificate from Dr. : ___________________________ Dated : _____________
☐ Supporting letter from my parent/caregiver
☐ Other (please describe) ___________________________

Student Signature : ___________________________ Date: _____________
Parent Signature : ___________________________ Date: _____________

Deputy Principal/Review Panel’s Recommendation:

☐ Upheld
☐ Declined
____________________________________________________________________________________________
____________________________________________________________________________________________

Signature of Deputy Principal: ___________________________ Date: _____________

Copies to:
Deputy Principal
Head Teacher: ___________________________________________
ClassTeacher: ___________________________________________
Office File
Student