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

Reason for application (please tick):
☑ Absent 2 days before an Assessment Task
☑ Late or missed 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: ______________

Head Teacher’s Recommendation:
☑ Upheld
☑ Declined
_______________________________________________________________________________________
_______________________________________________________________________________________

Signature of Head Teacher: ___________________________ Date: ______________

Copies to:
Head Teacher
Office File:
Student