This form is to be completed by ALL students who:
(a) failed to complete a task on the due date
(b) are absent from an in-school assessment task
(c) wish to apply for an extension of due date
(d) have some incidence(s) or event(s) which may impact on their performance in the assessment task

NOTE The completion of this application does not guarantee acceptance

Student Name: ____________________________ Class: _______ Year: _______

Subject: ____________________________ Teacher: ____________________________

Title of Assessment Task: __________________________________________________

Due Date for Task: ______________ Date of Application: ______________

Please complete the appropriate section of this application

Nature of application: (Tick the appropriate box below)
Absence from In-School assessment Task  ☐ Extension of Due Date  ☐ Misadventure  ☐
Late Submission of Task  ☐ Other  ☐ (Please state)________________________________

Evidence Supporting Reason(s) Eg Certificate from Doctor, Letter from Parent etc - Must be supplied otherwise application will not be accepted

(Signature of Student) (Parent or Guardian)

Checklist for Studies Coordinator Notification:  ☐ Student  ☐ Teacher  ☐ Dean of Studies

Action taken: ____________________________

Studies Coordinator’s / Teachers Response to Application
This section will be returned to the student and must be attached to the assessment task

Student Name: ____________________________ Subject: _______ Class: _______ Year: _______

Title of Assessment Task: __________________________________________________

Your application has been considered and the following decision has been made

________________________________________________________________________

with the following penalty (if any) __________________________________________

Teacher’s Signature ____________________________ Studies Coordinator Signature ____________________________