



EXTENSION / ILLNESS/ LATE / MISSED / MISADVENTURE APPLICATION FORM

WHEN TO USE THIS FORM

- you are absent from school for a legitimate reason
- you know in advance you are going to be absent from school on the due date
- un-foreseen circumstances have prevented you from submitting or completing the task

A medical certificate or relevant documentation should be provided stating clearly: the date of the onset of the illness/ misadventure, additional dates of consultation, a description of the student’s symptoms, the duration of the condition and demonstrate how the impact of the illness/misadventure has materially disadvantaged the student.

For extensions of time this form should include the date/s, time, duration and a description with details attached from an independent person where relevant (e.g. police, counsellor, doctor etc.) demonstrating how the student has been materially disadvantaged.

This form must be returned on the first day back by 8:50am after absence from school to your teacher or Head Teacher in their absence. Applications for extensions of time for legitimate reasons must be submitted 3 days before the due date to allow sufficient time for the application to be processed.

Refer to the assessment schedule for detailed information.

STUDENT AND PARENT TO COMPLETE THIS SECTION

Read the instructions above. If this space is insufficient, please attach additional documentation.

Tick to indicate the nature of the application: Extension Illness Late Missed Misadventure

Student’s Name: _____ Year: _____

Subject: _____ Teacher: _____

Task Name: _____ Due Date: ____/____/____

Reason: *Parent to complete*

Evidence Attached (e.g. Medical Certificate): Yes No

(In the case of illness, a medical certificate **must** be attached)

Name: _____ Contact details: _____

Parent Signature: _____ Date: ____/____/____

SCHOOL USE ONLY

Teacher’s Recommendation: _____

Teacher’s Name and Signature: _____ Date: ____/____/____

Head Teacher’s Decision:

Approved

Declined

Declined Details: _____

HT decision communicated to student on : _____

Head Teacher’s Signature: _____ Date: ____/____/____