



## 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: \_\_\_\_ / \_\_\_\_ / \_\_\_\_