



ILLNESS/MISADVENTURE INFORMATION AND APPLICATION YEARS 10, 11 AND 12

Illness/Misadventure applications can be submitted where a sudden illness or misadventure:

- occurred immediately before or during an assessment task
- was unexpected
- was beyond student control
- prevented students from attending OR diminished their exam performance.

It's recommended that students attend/complete every assessment/examination and submit what has been completed for by the due time. If students do not complete/submit assessments and then application is unsuccessful they will receive a mark of zero. The school does not expect students to attend examinations against specific medical advice.

- Hand-in assessment tasks are to be submitted upon student's immediate return to school.
- Students should be prepared to sit examinations and in-class tasks upon their return to school.
- The usual practice for students who were not in attendance for examinations/in-class tasks will be an alternative task.

HOW TO APPLY

1. Obtain evidence from a professional to substantiate your application. This may include a doctor's certificate or police report. Documentation must relate to the day of the task.
2. Complete the form and submit to the Front Office no more than two days after the original assessment date OR the end of the examination period.

RESTRICTIONS ON APPLICATIONS

Applications will not be accepted on the basis of:

- difficulty preparing for a task. Lost preparation time (including technology failure)
- alleged deficiencies in teaching
- lack of facilities for study. Misreading exam timetables and/or instructions
- long-term illness (e.g. glandular fever, asthma or epilepsy), unless you suffer a flare-up of the condition immediately before or during an assessment task/examination
- conditions for which you have been granted (or should have applied for) disability provisions.
- courses where you are a self-tuition student
- other commitments such as: participation in entertainment, family holiday's, work, sporting events/competitions, or attendance at exams conducted by other educational organisations.

PROCESSING OF APPLICATIONS

- All completed applications are to be submitted to the Front Office upon student's immediate return to school. If absence is long-term, students should contact the relevant Deputy Principal.
- The Deputy Principal will notify parents/carers if their child's application is unsuccessful.
- Unsuccessful applications can be appealed, in writing, no later than 3 days after receiving the decision. The appeal will be considered by the principal or delegate.
- See Assessment Schedules and guidelines for further information.
- The school will notify parents/carers if the application is successful.



ILLNESS/MISADVENTURE APPLICATION

This form must be completed and submitted to the Front Office **within two days of returning to school.**

SURNAME: _____ GIVEN NAME: _____ YEAR _____

Complete the sections below for each subject related to the application

	Subject	Date of Task	Nature of Task e.g. ATI	Teacher	Outcome Requested (circle)		
					Task reschedule	Marks * consideration	Other (provide details)
1.					Reschedule	MC	Other
2.					Reschedule	MC	Other
3.					Reschedule	MC	Other
4.					Reschedule	MC	Other
5.					Reschedule	MC	Other
6.					Reschedule	MC	Other

* Reviewed by panel at end of year

BASIS FOR APPLICATION (Illness OR Misadventure): _____

SUBSTANTIATING EVIDENCE ATTACHED: (medical certificate or other documentation): Circle: YES / NO

Signed: _____ Date _____ / ____ / ____ (student)
Signed _____ Date _____ / ____ / ____ (parent/carer)

HEAD TEACHER'S COMMENT:	HEAD TEACHER'S COMMENT:	HEAD TEACHER'S COMMENT:	HEAD TEACHER'S COMMENT:	HEAD TEACHER'S COMMENT:	HEAD TEACHER'S COMMENT:
Subject 1:	Subject 2	Subject 3	Subject 4	Subject 5	Subject 6
Rescheduled date:	Rescheduled date:	Rescheduled date:	Rescheduled date:	Rescheduled date:	Rescheduled date:
____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____
Signed:	Signed:	Signed:	Signed:	Signed:	Signed:
Date: ____ / ____ / ____	Date: ____ / ____ / ____	Date: ____ / ____ / ____	Date: ____ / ____ / ____	Date: ____ / ____ / ____	Date: ____ / ____ / ____

DETERMINATION BY DEPUTY PRINCIPAL:

Upheld <input type="checkbox"/>	Declined <input type="checkbox"/>	Notes: (if applicable)
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Signed: Deputy Principal _____

Date: _____

FRONT OFFICE ONLY

SUBMISSION TO FRONT OFFICE:

NOTES:

RECEIVED: ____/____/____

BY:

ENTERED: ____/____/____

BY: