

ILLNESS & MISADVENTURE FORM

Year 10		Year 11			Year 12		
Student Name:							
Subject / Course:				Teache	r:		
Today's Date:			Date o	f Assessm	nent Task:		
Task:							
Weighting:							
Nature of Task: (Tick 1) In	Class Task 🗆] На	ınd In Task	For	mal Exami	natior
Reason for Appeal: (Tick 1) ILLNESS				MISADVENTURE			
Explain how unforesee on the due date or pre							
Doctor's Certificate of attached:	or Medic	cal Certificate		YES		NO	
Student's signature:				Date:		1	



ILLNESS & MISADVENTURE FORM

H E A	Suggested action to be taken:						
Ď							
O F							
F A C							
Ü	Mark task and review at end of assessments for estimate						
T	Assessment mark (or zero) resulting from appeal entered into Edumate						
Y	Assessment returned to student with decision of appeal						
0	Send a 'N" Warning letter to the student						
С							
O M P	Head of Department's signature:						
L E	Date:						
T E	PLEASE RETURN THIS FORM TO THE HEAD OF STUDIES						
H	Results of Appeal:						
Ā	A						
0	• Declined Occurrent						
F							
S T							
U D							
I E S	Action to be taken:						
T O	☐ Mark task and award marks to student, review at end of assessments for estimate						
С	☐ Mark task to determine achievement of outcomes but "zero" mark is awarded for task						
O M P	☐ Inform Head of Faculty to construct a 'N" Warni	ng letter to the student					
L E	Head of Studies signature:						
T	· ·						