



## Request for Special Consideration Form

COPY TO BE FILED IN STUDENT FOLIO WITH RELEVANT ASSESSMENT ITEMS

<b>Step 1</b>	<b>STUDENT TO COMPLETE</b>			
	Name:	Assessment impacted:		
	Date request submitted:	Subject	Assessment Task	Due Date
	Dates of provision requested: / / - / /			
	Documentary evidence attached: Yes / No			
	Student signature:			

<b>Step 2</b>	<b>PARENT/CARER TO COMPLETE</b>		
	Special Provisions	<input checked="" type="checkbox"/>	Explanatory notes
	Long term physical concerns or mental health issues		Explain the reasons why you require special provisions. Legitimate reasons may include illness, bereavement, national or state representation, or extended legitimate absence.
	Educational needs due to: cultural linguistic factors		
	Illness, injury or absence		
	Suspension		
	Missed exam due to illness		
	Parent signature:		

<b>Step 3</b>	<b>JS, MS, SS HOD TO COMPLETE</b>	
	Application is: Approved / Not Approved	Comments:
	HOD Signature:	

JS, MS or SS HoD to distribute form to relevant Curriculum HoDs and enter details in OneSchool under Support>Support Provisions tab.

<b>Step 4</b>	<b>TEACHER TO COMPLETE</b>			
	Teacher signature:	Assessment Task	Special Provisions	Due Date

Teacher to discuss special provisions with Curriculum HoD and communicate this to student and parent.

The above outlines the special provisions for this assignment. You, as the student, have the responsibility to ensure that this assessment is completed by the revised date. Please indicate your agreement by completing your name and signature below.

\_\_\_\_\_ (Student signature)