



Appeals Due to Illness & Misadventure Form

Student Details

Student Name

Year

Assessment Details

Date of Task:

IMPORTANT A SEPARATE FORM MUST BE SUBMITTED FOR EACH ASSESSMENT THAT YOU ARE APPEALING

Describe how illness or unforeseen misadventure affected your performance or prevented your attendance. Attach any documentation that you might have to support your appeal.

ATTACH A SEPARATE PAGE IF REQUIRED

Student declaration:

I have carefully read the *Senior Assessment Policy & Procedures* detailing the Appeals Process (page 10).

I have completed each item on this form and included appropriate documentation to support my appeal.

I declare that all the information I have supplied is true.

Signature

Date

3 copies:

Original to Applicant

DP Monitoring Folder

Teacher

Student File

To be completed by DP Zielinski

Appeal upheld?

YES

NO

Further Comments

ATTACH A SEPARATE PAGE IF REQUIRED

Signature

Date