

STUDENT ASSESSMENT EXTENSION APPLICATION

Instructions: This form is to be used by students to request an Assignment Extension or to request a new assessment occasion.

In the case of a planned absence (eg school commitment, genuine family reason etc) application must be made 5 or more days prior to the due date or date of assessment. For unplanned absences beyond your control, application must be made no later than 5 days after the due date or date of assessment. Evidence of work done to date, may be required.

Student Name: _____ Date: _____

Subject: _____ Level: _____ Teacher Name: _____

Date of the Assessment or Due Date of Assignment: _____

Standard Name and Number: _____

I request an extension for the above assessment. The reason for this request is:

Ill health Medical Certificate attached Yes / No
Details / Date: _____

Family reasons Documentation attached Yes / No
Details / Date: _____

School Commitment
Details / Date: _____

Other Reasons
Details / Date: _____

Signed: _____
Student Date

Teacher Assessor to complete:

Extension of Time given: Yes / No New Due Date: _____

New Assessment Occasion granted: Yes / No

New Assessment Occasion date: _____

Reason if declined: _____

Student informed: Yes / No Date: _____

Signed: _____ Date: _____
Teacher Assessor