



McCarthy Catholic College

Application for Extension of or Special Consideration for an Assessment Task

This form is to be completed by any student *requiring* an extension of time or special consideration for the completion of an assessment task due to unforeseen or extreme circumstances. Consideration will only be given to those students with valid and substantiated reasons such as prolonged or extreme illness or *major* disruption to task preparation/or exam.

Ensure you read pages 3-9 in Assessment Procedures & Schedules Booklets.

It is important to note that it is a BOSTES mandate that no student is to receive unfair advantage in any task.

Complete this form accurately, attach your supporting evidence, see your class teacher for the extended date or special consideration and hand it in to the office.

Today's Date: _____

Student Name: _____

Year: _____

Subject	Class Teacher	Assessment Task	Original Due Date for Task	New Due Date for Task <small>as negotiated with your teacher</small>	Teacher Signature

Variation to Usual Submission Procedures: (such as submission by email, alternate presentation)

Reason for Application

Supporting Evidence Attached

Student Signature: _____

Parent Signature: _____

*****SCHOOL USE ONLY*****

Subject	Teacher	KLA Coordinator	Approved	Date	RISC Entry
			YES <input type="checkbox"/> NO <input type="checkbox"/>		
			YES <input type="checkbox"/> NO <input type="checkbox"/>		
			YES <input type="checkbox"/> NO <input type="checkbox"/>		
			YES <input type="checkbox"/> NO <input type="checkbox"/>		