I apply for an extension based on consideration of the following factors which may affect my performance in this Assessment Task. (Documentary evidence must be provided except in exceptional circumstances).

In applying for this special consideration, I assure the Principal that I am not seeking unfair advantage over other students in this course.

Student’s signature: .............................................................. Date: ................

Parent/Carer’s signature: ........................................................ Date: ................

Recommendation of Teacher/ Head Teacher:

Signature of Teacher/ Head Teacher: ...................................... Date: ................

Recommendation of Assessment Panel: Application for Extension

Name:................................................................. Year: ................

Subject: ........................................ Teacher: ................

Assessment Task Number (as per booklet):..................

Decision details:........................................................

Principal: ...................................................... Date: .............

Year Adviser: ...................................................... Date: .............

Head Teacher of Teaching and Learning: ....................... Date: .............