

EXTENSION TO EXAM OR ASSESSMENT DUE DATES

Years 7 to 10

Extensions will only be granted in situations where a student or their parent/caregiver can provide supporting documentation for illness or misadventure.

EXTENSION PROCEDURE YEARS 7 – 10

1. Complete the Assessment Extension Form (found on the school website or available from Student Reception)
2. Hand in/email form plus supporting documentation to Student Reception on or before the date of the exam/due date of the assessment - Email: Studentreception@lowoodshs.eq.edu.au
3. Student Reception will process the application within 36 hours
4. An email will be sent to the student (applicant) and their parent/caregiver
5. All the students' teachers will be emailed to advise that the extension has been approved
6. Student is to check-in with their teacher to discuss the revised date for the exam or new due date for the assessment.

Supporting Documentation

An example of supporting documentation for **illness** is a **medical certificate** for either the student themselves or a family member, where that family member's illness has prevented the student from attending school or completing assessment requirements.

An example of supporting documentation for **misadventure** is an official **notification of death** or a **letter from a funeral provider**.

Extensions are not granted on the following grounds:

Students are **not eligible** for an extension on the following grounds:

- matters that the student could have avoided
- matters of the student's or parent/caregivers own choosing
- any form of sport, regardless of whether it is for school sport or representative sport
- absence due to family holiday.



ASSESSMENT EXTENSION FORM YEARS 7 - 10

Student Name: _____ Home Group: _____

Dates covered by supporting documentation:

From: _____ To: _____

Subject: _____

Reason for requesting an extension of the assessment due date or exam date:

Supporting documentation:

- ☐ Medical Certificate
- ☐ Other: _____

Student Signature: _____ Parent/Carer Signature: _____

Date: ____/____/____

Office Use Only :

Date application received: _____ Received by : _____

Supporting documentation: ☐ Yes ☐ No

Additional documentation required: ☐ Yes date requested ____/____/____ ☐ No

Extension Approved: ☐ Yes Duration of extension ____ days

☐ No Reason: _____

Emails sent: ☐ Teachers/SLT ☐ Case Manager

☐ Parent ☐ Student

☐ Contacts completed in Oneschool

Date Actioned: ____/____/____ Actioned By: _____