



PADUA COLLEGE

APPLICATION FOR EXTENSION FOR ASSESSMENT TASK

An application for an extension may be made by a student of Padua College **before the due date** for an assessment task when circumstances beyond the student's control prevent him from completing his assessment task on time. Whenever possible, it should include supporting documentation such as a medical certificate and/or letter from a counsellor. Every application **MUST** include a letter/statement by the student's parent or guardian to support the student's application and to confirm the circumstances given as the grounds for the extension, and the parent/guardian needs to co-sign the application for an extension.

A copy of the student's current timetable and/or exam timetable must also be attached.

Applications are made to the Head of Curriculum for the subject, through the subject teacher.

Please complete all sections of the Application Form.

STUDENT'S DETAILS

NAME: _____ YEAR LEVEL: _____
PC TEACHER: _____ HOUSE: _____
PARENT/GUARDIAN: _____
CONTACT DETAILS: *(Phone numbers)*

TASK DETAILS

SUBJECT: _____ TEACHER: _____
HEAD OF CURRICULUM: _____
TASK: _____
DUE DATE FOR THE TASK: *(dd/mm/yy)*
TIME GIVEN FOR COMPLETION OF THE TASK: _____

GROUND'S FOR APPLICATION *(Tick the appropriate reason)*

- ILLNESS/MEDICAL REASONS *(Please provide a medical certificate)*
 OTHER *(Please state briefly the reason why you are applying for an extension)*

BRIEFLY STATE THE EFFECT OF THIS CIRCUMSTANCE ON YOUR SCHOOL WORK:

STATE THE PERIOD OF TIME DURING WHICH YOU HAVE BEEN AFFECTED BY THIS ILLNESS OR CIRCUMSTANCE: *(or the time you expect to be affected).*

DETAILS/TYPE OF EXTENSION APPLIED FOR *(Please state here the type of extension you are requesting)*

- Extension of time and due date for an assignment/oral presentation/multi-modal presentation/performance/practical activity or project;
- Change of date for an exam.

How much extra time do you think you need to complete this task? Why?

Are you applying for an extension for any other assessment at this time?

- Yes No

SUPPORTING DOCUMENTATION:

*Please list here the documents supplied to support your application for an extension, for example:
Medical Certificates/letters/Counsellor's statement etc.*

STUDENT'S SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN'S SIGNATURE: _____ DATE: _____

NOTES/COMMENTS: *(Staff use only)*

RECORD OR ACTION TAKEN / EXTENSION GRANTED:

SIGNED: _____ DATE: _____