

ILLNESS OR MISADVENTURE

A girl who believes that circumstances occurring **immediately prior to or on the day of** an **assessment task**, and which were beyond her control, may diminish her result in that task should complete this form and give it to the Head of Department.

There can be no consideration for:

- General difficulties in preparation or general loss of preparation time
- Loss of study time or facilities
- Long-term illness
- Matters that could have been avoided by the student
- Other commitments (such as attendance at a sporting or cultural event)

Student's Name:	Connect Group:
Assessment task affected:	
Date of assessment task:	
Describe how the illness or misadventure you have suffered has affected your performance in the assessment task. You must attach independent evidence of the illness or misadventure (medical certificate, counsellor report, etc).	
Signed:(Parent)	Signed: (Student)
(Parent)	(Student)
Assessment Committee Decision:	