

## ILLNESS and MISADVENTURE APPEAL

**Name:** \_\_\_\_\_

**Subject(s) Missed:** \_\_\_\_\_ **Date(s):** \_\_\_\_\_

**HSC Course**  **Preliminary Course**  **Year 10**

**Reason For Requesting Illness Misadventure:**

- Illness \_\_\_\_\_
- Misadventure \_\_\_\_\_
- Bereavements /Funerals \_\_\_\_\_
- Other \_\_\_\_\_

**Supporting Documentation** (Please attach to this form)

- Medical Certificate
- Police Report
- Funeral Notice
- Other

Student's Signature: \_\_\_\_\_ Parent/Carer Signature: \_\_\_\_\_

### ACTION

Director of Curriculum

- Results will be reviewed at the end of the assessment period
- An estimate will be given
- Task has been completed with no penalty
- Task has been completed with \_\_\_\_\_ penalty
- The appeal has been declined
- Other

Signed: \_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Office Use Only</b>		
Date Received:	Date Task Completed:	Date Email Sent: