

## ILLNESS/ MISADVENTURE APPEAL FORM

Information / Application for Assessment Task Misadventure

<b>Name:</b>	<b>Subject:</b>	<b>Date</b> / /
--------------	-----------------	--------------------

This form is to be submitted if you were/are unable to complete an Assessment Task due to an unforeseen illness or misadventure.

**You cannot submit an appeal on the basis of:**

- difficulties in preparation or loss of preparation time including difficulties experienced with computers
- alleged deficiencies in tuition
- long-term illnesses such as glandular fever – unless you have suffered a 'flare-up' or exacerbation of your symptoms during the exam/task period
- the same grounds for which you received special exam provisions – unless you have experienced additional difficulties during a task
- misreading the exam or exam instructions

The illness / misadventure application is limited to matters pertaining to the conduct and presentation of the missed task only. Consequently, students may only appeal in relation to circumstances that occur immediately before the task in question. **Note: A separate Illness / Misadventure appeal form must be completed for EVERY missed task and must be received within 5 school days after the due date of the Assessment Task.**

---

### How to Complete this Illness / Misadventure Form

**It is essential that you follow these instructions for completing an Illness / Misadventure appeal form if you wish to give your appeal every chance of receiving favourable consideration.**

**Section A: Student Personal Statement** – completed by YOU

**Section B: Evidence of Illness or Misadventure** – to be completed by an appropriate professional. In the case of illness, a medical practitioner or other health professional must complete this section. In the case of misadventure, it may be more appropriate to have this section completed by an appropriate professional person not related to you (e.g. police officer). In either case this section **MUST** be completed if your appeal is to have any chance of being successful.

The documentation you provide must be current, specific to the time of the exams/tasks and submitted with this appeal form. It is your responsibility to give full details of your illness or misadventure and your responsibility to ensure that you have provided independent verification of your claims. **Failure to complete this section may seriously disadvantage your appeal.**

## Section A: Student Personal Statement

Describe how the illness / misadventure you have suffered has prevented you from attending the exam, performing the task or submitting the task by the due date. You must do this for EACH AND EVERY task in which you wish to appeal.

<b>1</b>	<b>NAME:</b>	
<b>2</b>	<b>SUBJECT:</b> PRELIMINARY / HSC	
<b>3</b>	<b>DATE OF SCHEDULED TASK:</b>	
<b>4</b>	<b>NAME OF TASK:</b>	
<b>5</b>	<b>Is this task an Exam?</b> <div>YES / NO</div>	<b>5a Did you have Special Examination Provisions?</b> <div>YES / NO</div>
<b>6</b>	Did you notify NSW School of Languages on the day that you missed the task?  YES      Whom did you notify?  NO      Why did you not notify NSW School of languages?	
<b>7</b>	Describe how the illness / misadventure has prevented you from completing the task by the due date (including submitting the task by the due date if appropriate). <i>Attach a separate sheet if necessary.</i>	
<b>8</b>	Can you complete this task (or alternative task) as soon as possible?	YES / NO
<b>9</b>	Do you consent to NSW School of Languages contacting any person you have nominated on this form to provide further information?	YES / NO

*You will be notified of the outcome of your appeal as soon as it can reasonably be assessed and verified by NSW School of Languages.*

## Section B: Independent Evidence of Illness / Misadventure

To be completed by a health professional or other professional who is not related to you.

To accurately assess the circumstances of a student appeal, the following information is required:

- In case of illness, the date of onset of the illness, plus any additional dates of consultation & **ATTACH** an **OFFICIAL MEDICAL CERTIFICATE for the duration of the illness**.
- In the case of misadventure, the date and time of the occurrence and subsequent events.
- The specific details of the illness / misadventure should be outlined.
- In the case of illness, health professionals should describe the student's symptoms and describe how these symptoms could impede the student's examination/task performance.
- If possible, some indication of the duration of the condition should be given.

(**NOTE:** The student has agreed in writing to our providing further information to an officer, appointed by NSW School of languages, should the need arise.)

(Please complete carefully. You may be contacted if additional information is required.)

---

---

---

---

---

---

---

NAME: \_\_\_\_\_ Profession: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*NSW School of Languages strongly recommends that you **sign this form** only after you have completed Section A and have had Section B completed by an appropriate person.*

### PRINCIPAL'S STATEMENT

(Must be completed by the principal of the student's HOME school.)

**NOTE:** This statement should relate directly to the genuineness of the appeal, and should include a recommendation based on the information available to the school. Please ensure that you have read the instructions above.

Are there any other NSW School of Languages students at your school who are appealing due to a related misadventure? Y / N  
If yes, please list student names.

---

---

Comments on this appeal

---

---

---

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: / /