



BURDEKIN CATHOLIC HIGH SCHOOL
APPLICATION FOR SPECIAL PROVISION FORM

STEP 1:

STUDENT DETAILS:

NAME: _____ CLASS: _____

TEACHER/S: _____ SUBJECT/S: _____

Junior Student

Senior Student

STEP 2: Assessment item/s affected: _____

Date Set: _____ Date Due: _____

STEP 3: REASONS FOR SPECIAL CONSIDERATION (student & parent/guardian to complete):

- | | |
|---|---|
| <input type="checkbox"/> Medical (attach medical certificate) | <input type="checkbox"/> Bereavement (attach documentation) |
| <input type="checkbox"/> Sporting Representation (attach documentation) | |
| <input type="checkbox"/> Other (attach documentation) | <input type="checkbox"/> Family Wedding (attach invitation) |

Details (*including dates*): _____

SIGNATURES:

Student: _____ Date: ____ / ____ / ____

Parent / Guardian: _____ Date: ____ / ____ / ____

CONSULTATION WITH CLASSROOM TEACHER: [Teacher to comment on student's progress]

SIGNATURE:

Subject Teacher: _____ Date: ____ / ____ / ____

STEP 4: FORM READY FOR SUBMISSION TO DEPUTY PRINCIPAL

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ADMINISTRATION (Deputy Principal to complete):

Insufficient grounds/ineligible for Special Provision: _____

Special Provision granted: New Date: ____ / ____ / ____ Lesson: _____

Deputy Principal: _____ Date: ____ / ____ / ____

TOP PORTION OF THE FORM RETAINED BY OFFICE
BOTTOM PORTION OF FORM GIVEN TO CLASSROOM TEACHER BY STUDENT