

**CONSERVATORIUM HIGH SCHOOL  
JUNIOR ILLNESS/MISADVENTURE APPLICATION**



This sheet must be completed and attached to the submitted task

<b>Last Name:</b>		<b>First Name:</b>		<b>Year Level:</b>	
<b>Course:</b>					

**Closing date:** Completed signed application, completed assessment/examination and all relevant documentation as specified by the form must be submitted to the Head Teacher of the subject within 48 hours of return to school as per *CHS Junior Assessment Policy and Procedures*.

**Section A – Student Statement**

<b>Assessment or examination task</b> <i>Specify type of task: Report, Speech, Performance, Trial HSC Exam</i>	<b>Task due date</b>	<b>Weighting</b> %

**Details of effect on performance:**  
*Describe how illness or unforeseen misadventure affected your performance or prevented your attendance. Give details of any action you took to report this.*

**Student Declaration**

I have carefully read the information provided in the Conservatorium High School Assessment Booklet regarding the rules and procedures for illness/misadventure for Junior students.

I consider that my performance was affected by illness or unforeseen misadventure which occurred immediately before or during the assessment/examination. I declare all the information I have supplied is true.

**Student signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Section B – Witness Statement**

Please ensure to attach Section B documentation to this application.

Illness – <i>attach the following documentation:</i>	Misadventure – <i>attach the following documentation:</i>
<ul style="list-style-type: none"> <li>● Parent/Carer Note</li> <li>● Doctor's Certificate</li> </ul>	<p>A written witness statement:</p> <ul style="list-style-type: none"> <li>● Date of misadventure</li> <li>● Were they a witness to the event?                             <ul style="list-style-type: none"> <li>○ If NO, how did they obtain evidence of the event?</li> </ul> </li> <li>● Description of event</li> <li>● Contact details.</li> </ul>

**Section C – Resolution (Assessment Review Committee use only)**

<b>Outcome of application:</b>		<b>Date task completed:</b>	
<b>Task submitted/completed:</b>		<b>Terms of assessment submission:</b>	
<b>Additional comments:</b>			

<b>Assessment Review Committee Approvals</b>		
<b>Head Teacher</b>	<b>Assessment Review Committee Member</b>	<b>Deputy Principal</b>