SDEHS Assessment Task Form Tick either 1 or 2 Illness or Misadventure or Extraordinary Circumstances Application 1. This form must be submitted to the Head Teacher of the course by email, as early as possible and not later than the submission OR ☐ Appeal against a task result 2. This form must be submitted to the Head Teacher of the course by email, within 7 days of notification of the result. Section 1: To be completed by supervisor Student name Year Course Task no. Due date Explain the reason for this application **Supporting documentation must be attached** (please tick) ☐ Doctor's certificate Other Supervisor name Date Section 2: To be completed by Head Teacher ☐ Extension of time without penalty Revised due date ☐ Alternate task Revised due date ☐ Zero mark awarded. Task to be completed for demonstration of outcomes Revised due date **Explanation Head Teacher name** Date Right of appeal to Assessment Review Panel: A student and/or supervisor has the right to appeal this decision, within 7 days of its notification. To appeal, the supervisor must submit this form PLUS a written response stating the grounds for appeal, to the course Head Teacher. The decision of the panel is final. Section 3: To be completed by Assessment Review Panel **Assessment Review Panel decision** Appeal upheld ☐ Task to be marked without penalty ☐ Alternate task to be provided Revised due date ☐ Estimate to be given based on evidence (The estimate will not be finalised until the end of the course based on performance across the course)