

Special Consideration Form

Please use Block/Capital Letters. When questions are not applicable to your circumstances, please specify with "N/A". Please tick all relevant boxes where they are applicable.

For the deferral of assessment submission including practical observation, please submit this form **NO LATER THAN THREE WORKING DAYS** after the due date, unless compassionate and compelling circumstances (See the definition of compassionate and compelling circumstances at *Assessment Policy and Procedures* at https://npa.edu.au/student-services/forms-policies/). You are required to attach supporting evidence (e.g., medical certificate) with your application.

Part A – Student							
STUDENT DETAILS - The student must complete this section.							
Student Number	r:						
Title:							
Surname/Family name:							
First name:							
Second/Middle name:							
Qualification/Program:							
Phone (Home):							
Phone (Work):							
Phone (Mobile):							
Email:							
SPECIAL CONSIDERATION REQUIRED FOR ASSESSMENT EXTENSION SUBMISSION (Provide CORRECT unit code and name in BLOCK LETTERS)							
Unit code	Unit	name	Assessment name	Assessment due date	Trainer's name		



Any other requests for special consideration:								
Part A – Student (continued)								
DESCRIPTION OF CIRCUMSTANCES								
Please tick all relevant boxes where they are applicable and clearly state the circumstances that have an impact on your studies. You must state the affected duration (in days, weeks or months). YOU MUST ATTACH SUPPORTING DOCUMENT/S (e.g., medical certificate, letter from a health counsellor).								
☐ Serious illness (please attach a medical certificate)			☐ Death or serious illness of immediate family member (Please attach a letter from a counsellor, doctor or health practitioner indicating the condition. Please provide the proof of the relationship between the family member and the student)					
or other documer police depending evidence must den	nce may include a med nts from a counsellor, on the nature of the nonstrate the severity an which can impact the stu	☐ Mandatory commitments (The student has unavoidable commitments such as jury duty, court appearance, military reserve activities and, emergency service commitments. Please attach documentation showing compulsory attendance dates)						
Other compassion	•	-	1	•				



STUDENT DECLARATION									
I declare the details I have supplied to be accurate, true and correct.									
Student Signatu		Date:							
Part B – Staff									
(Step 1) Studer	(Step 2) Quality Assurance								
☐ Approved	□ Not Approved	☐ Approved	□ Not	Approved					
Officer's		Officer's							
Name:		Name:							
Date:		Date:							