



Sickness/Misadventure Application

Name: _____ Date: _____ School Year _____

The St Hilda's conditions for special consideration of academic results due to sickness/misadventure are consistent with those of the School Curriculum and Standards Authority.

Before completing a Sickness/Misadventure form, please read the following information carefully:

- Has your performance in an assessed submission of work/test/examination been affected by a temporary sickness, non permanent disability or unforeseen misadventure suffered immediately before or during an assessment/examination?
- Were you prevented from attending a test/examination or submitting work due to sickness and/or misadventure?

If you answer YES to either, or both, of these questions then you should complete this form. The circumstances must have been beyond your normal control.

If your difficulties in sitting test/examinations or submitting work are the result of the reasons listed below, then your circumstances fall outside the grounds for special consideration.

- Difficulties in preparation or loss of preparation time - for example, as a result of sickness during the year **unless in the two weeks prior** to an assessment/examination.
- Alleged deficiencies in tuition.
- Long term illness such as asthma and epilepsy - unless, you have suffered an acute episode of your illness during the assessment/ examination period.
- The same grounds for which you received special examination provision - unless you experienced additional difficulties during an assessment/examination session.
- Misreading the assessment/examination timetable.
- Misreading assessment/examination instructions.
- Attendance at a sporting, cultural event or holidays.

If the application is accepted then the normal procedure is for the School to calculate a predicted assessment mark using similar types of assessments as a basis. The higher of the two marks, the actual assessment mark or the calculated predicted assessment mark, will be allocated to you for that assessment.

The application, with relevant documentation, must be submitted to a School Psychologist, within **five school days** of an in class assessment and within **two school days** of the student's last examination. The application will be discussed with the Dean of Curriculum and the School Psychologist.

Completion of the Form

- Section A** **Course details:** This section is to be completed by the applicant personally
- Section B** **Misadventure Evidence** (non-medical): This section should be completed by a person not related to the candidate, who is a witness to the misadventure eg. Attending police officer.
- Section C** **Medical Evidence:** A medical certificate completed by a medical practitioner or registered health professional (not related to the student) must be attached if the application is on medical or psychological grounds.
- Section D** **Office procedures:** School notification procedures which are completed by the Dean of Curriculum and School Psychologists.

Declaration

I declare that, to the best of my knowledge, all the information given on this form (and attachments) is correct.

I authorise St Hilda's to discuss this application with any person who has signed this form or attachment.

Signature of Applicant:Date.....

Signature of Parent/Guardian (if applicable):Date.....

Section A: Subject/Course Details-to be completed by the applicant personally

Name: _____

For each written and/or practical assessment/examination in which you are claiming special consideration (as indicated below), describe how your illness or misadventure affected your performance in, or prevented your attendance at that assessment. **Do not use dittos, or write 'As above', but describe how your performance (or non-attendance) was affected for each assessment/examination. This table must be completed.**

Course _____	Teacher _____	Date _____
Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

Course _____	Teacher _____	Date _____
Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

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Title and type of assessment _____		
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Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

Course _____	Teacher _____	Date _____
Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

(Additional information may be attached)

Name: _____

For each written and/or practical assessment/examination in which you are claiming special consideration (as indicated below), describe how your illness or misadventure affected your performance in, or prevented your attendance at that assessment. **Do not use dittos, or write 'As above', but describe how your performance (or non-attendance) was affected for each assessment/examination. This table must be completed.**

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Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

Course _____	Teacher _____	Date _____
Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

Course _____	Teacher _____	Date _____
Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

Course _____	Teacher _____	Date _____
Title and type of assessment _____		
_____	Did you attend	Yes / No
Detail of effect on performance _____		
Teacher Signature _____	Head of Dept _____	

(Additional information may be attached)

Section B: Misadventure Evidence (non-medical) – to be completed by an independent witness

If the misadventure or event is of a **non-medical nature**, the details should be recorded here by an independent witness. Any other relevant information or supporting evidence **must** be written below or attached.

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(Continuing, additional or supporting evidence should be attached.)

Witness details

Note: The witness must not be related to the applicant, and may be contacted if further information is required.

Name (block letters):

Address:Telephone: Daytime

..... Mobile:

Signed:

Date: / /

Section C: Medical Evidence-to be completed by a medical practitioner/registered health professional not related to the student

If an applicant’s claim is based on medical or psychological grounds a **medical certificate must be attached**. The certificate must document

- The dates of the onset and functional resolution of the illness, and
- The degree of impairment at the time of the illness. Note that the degree of functional impairment at the time of the illness must be categorised as
1 = mild, 2 = moderate 3. = severe, 4. = chronic

Notes

1. Sickness of a chronic nature is not acceptable. The process for students with a chronic illness is to apply for special assessment/examination arrangements early in the year. The School Psychologists may request additional information.
2. Sickness can include acute emotional upsets such as bereavements or serious illness in the family. It does not include emotional traumas such as panic attacks or stress due to the examinations.
3. If you would like to discuss this application further please contact the School Counsellors on 92854100.

Section D: Office procedures and notification

Outcome of application (completed by School Psychologists)

Applications will be assessed by the School Counsellor/s, relevant Head/s of Department and the Dean of Curriculum at the end of the school year, prior to the submission of a student’s results to the SCSA.

If the application is accepted then the normal procedure is to statistically predict an assessment/examination mark **at the end of the school year**, using other school assessment tasks that closely parallel the assessment/examination as a basis. If the student has completed the assessment/examination then the higher of the actual mark and the predicted mark will be assigned.

The student will be notified of the outcome detailed below

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School Psychologist

Dean of Curriculum

Date