



Illness / Misadventure Form

Student's Name: _____ Homeroom: _____

Course: _____

Class Teacher: _____

Assessment Task Date: _____

Type of Task (tick one) In College Exam Test Task
or
 Task done outside college to be handed in

Outline the circumstances of your case.

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Do you have a Doctor's Certificate to support your case? If YES, attach it to the back of this form.
Do you have any other documentary evidence to support your case? YES/NO
If YES, list below the nature of the evidence and attach it to the back of this form.

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Declaration

I/We declare that the above information is a true and accurate account of the circumstances surrounding the non-completion on/by the due date of the assessment task stated.

Student's Signature: _____ Date: _____

Parent's Signature: _____

College Use Only

Appeal: Upheld/Rejected Signature: _____

Student/Parents notified in writing of outcome.

Date notified: _____ By Whom: _____

LOL RECOMMENDATION:

