

Higher Education Special Consideration General

Supplementary assessment, extension of assessment date, attendance requirements

This information is for current Higher Education students applying for special consideration for circumstances beyond their control that prevent them from undertaking or completing an assessment task at the scheduled time. **Please note:** if you are a VET student, you must use the VET Special Consideration - General Application form. Also, if you are requesting an extension for only one assessment task, do not use this form. Follow the discretionary extension process instead.

Types of Special Consideration

Eligible students can apply for the following types of Special Consideration – General:

- **Supplementary Assessment**
- **Extension of Assessment due date**
- **Attendance Requirements**

Please note: From Semester 1, 2016 Grade Consideration will no longer be available as an outcome of special consideration.

For applications for deferred examination special consideration please complete the Application for Special Consideration – Deferred Examinations form.

Eligibility

Applications for Special Consideration – General will only be considered on the following grounds:

- **Medical Reasons:** e.g., hospital admission, serious injury, severe asthma, severe anxiety or depression. Does not include minor illness.
- **Compassionate Grounds:** e.g., death of significant other, significant relationship breakdown.
- **Hardship/trauma:** e.g., victim of crime, sudden loss of income or employment, severe disruptions to domestic arrangements.
- **Other Causes:** e.g., military or jury service, service to emergency services such as the Country Fire Authority.

Circumstances within the student's control (e.g. returning home, holidays, social or family occasions, usual demands of employment, difficulties with the English language) and minor ailments will not be accepted as grounds for special consideration.

Supporting Documentation

Supporting documentation must be submitted and can include one or more of the following:

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- The Health Care Professional Certification form (see Health Care Professional Certification additional information);
- A medical certificate: FedUni will accept a medical certificate (bearing the provider/licence/registration number and official stamp), stating in reasonable detail:
 - > The dates of any relevant consultations or attendances;
 - > If relevant, the nature of the complaint or treatment; and
 - > A specific statement that in the health care professional's opinion (not the student's opinion) that, as a result of the complaint or treatment, the student is, or was, severely, moderately, or in a minor way, impacted or unfit or unable to undertake the assessment or attend the campus over a specific timeframe.

Submission details

Applications must be lodged no later than three University working days after the approved submission date of the assessment task. Applications can be lodged in the following ways:

- **On Campus:** Submit the application form and supporting documentation, in person, to Student HQ.
- **Online:** Submit the application and supporting documentation via email to specialcon@federation.edu.au
- **Partner Provider students:** Submit the application and supporting documentation to their Partner Administration Office.

Students are advised to retain copies of all documents submitted.

What Happens Next?

Applying for special consideration does not guarantee it will be granted

Where the student submits inadequate documentation, the Faculty may request additional information and/or original documents. Failure to provide these documents in a timely manner will result in the withdrawal or rejection of the special consideration application.

Once the application has been considered, the student will be notified of the outcome via their Federation University student email address.

In most cases, the outcome will be communicated to the student as soon as possible; however this process can take up to two weeks.

Possible Outcomes of Special Consideration – General

There are four possible outcomes of an application for Special Consideration – General:

- Special consideration granted: a supplementary assessment, administered by the Faculty, will be provided for the student.
- Special Consideration granted: a new submission date is to be arranged for the student's assessment task.
- Special Consideration granted: attendance requirements renegotiated.
- Special Consideration not granted.

A student may cancel or withdraw their application by contacting the faculty directly

Privacy and Confidentiality

Federation University Australia ('the University') is committed to protecting and maintaining the privacy, accuracy and security of personal information. The sharing of the information in this form must comply with the University's Information Privacy Policy, which can be accessed at: http://policy.federation.edu.au/university/general/information_privacy/ch01.php

Individuals have a right of access to, and correction of, their personal information in accordance with privacy legislation and the University's Information Privacy Policy. Please direct any enquiries in this regard to the University's Privacy Officer by telephone on (03) 5327 9504 or email privacyofficer@federation.edu.au

Warning – Uncontrolled when printed! The current version of this document is kept on the FedUni website.

Authorised by: Academic Board
Document Owner: Federation University Australia: Health & Wellbeing
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Current Version: 03/04/2017
Review Date: 01/07/2017

Application for Special Consideration General

Important note: If you are applying for a deferred examination, complete the 'Application for Special Consideration – Deferred Examination' form

Personal Details		Study Details	
FedUni Student ID No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Title	<input type="text"/>
Given name/s	<input type="text"/>	Program Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Family name	<input type="text"/>	Program Name	<input type="text"/>
Telephone	<input type="text"/>	Semester	<input type="text"/>
NOTE: Outcomes will be emailed to your Federation University Australia student email .		Campus	<input type="text"/>

International Student?	<input type="radio"/> No <input type="radio"/> Yes	If Yes:	<input type="radio"/> On-shore <input type="radio"/> Off-shore
Undertaking study at a Partner Provider?	<input type="radio"/> No <input type="radio"/> Yes	If Yes:	Partner Provider Name: <input type="text"/>
		If Yes:	Partner Provider Location: <input type="text"/>

Students are required to complete the table below. Record a request code for all pieces of assessment for which you are seeking special consideration. Request codes are: **SA** = Supplementary Assessment **EXT** = Extension of assessment date **AR** = Attendance requirements

Complete for all pieces of assessment for which you are seeking special consideration:					Office Use Only
Course Code	Course Title	Lecturer/Teacher	Request Code	Assessment Due Date	Approved?
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Assessment Task:				<input type="radio"/> Yes <input type="radio"/> No

Grounds for your application:	
<p>Attach any relevant supporting documentation (e.g. Health Care Professional Certification or medical certificate in the case of a medical condition, or police report or statutory declaration etc.)</p>	<p><input type="radio"/> Medical reasons</p> <p><input type="radio"/> Compassionate grounds</p> <p><input type="radio"/> Hardship / Trauma</p> <p><input type="radio"/> Other (Please specify): <input type="text"/></p>
<p>Additional Information (please provide information about how the event(s) have impacted on your studies and provide details of the specific request(s) you are making).</p> <p>Please note, if you are applying for special consideration on medical grounds, you do not need to provide specific details of a medical condition, but an appropriate Health Care Professional must complete and attach the Health Care Professional Certification or medical certificate.</p>	<p>Please state the length of time (in days, weeks or months) your studies have been affected:</p> <p><input type="text"/><input type="text"/> day/s <input type="text"/><input type="text"/> week/s <input type="text"/><input type="text"/> month/s</p>

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Have you previously applied for Special Consideration – General?	<input type="radio"/> No <input type="radio"/> Yes
Student's own strategies: Are you able to implement strategies to improve your situation?	

PRINT THIS FORM,
and sign and date in the space provided above. Hand in to Student HQ (with any relevant certificates/evidence) for processing.
Online Students: Submit application and supporting documents via email to specialcon.federation.edu.au

Student Declaration

I acknowledge that disciplinary action may be taken if I knowingly supply false or misleading information. I certify that to the best of my knowledge, the information supplied on this form is true and correct. I am lodging this form no later than **three** university working days after the due date of assessment task(s) listed for special consideration.

Name											
Signature	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"></div> <div style="width: 35%; padding-left: 10px;"> <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table> </div> </div>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y		

Office Use Only

Received by:										
Position:										
Supporting documents provided										
<input type="radio"/> Yes <input type="radio"/> No										
Signature:										
Date										
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D	D	/	M	M	/	Y	Y	Y	Y	

Partner Provider Recommendation

Partner Provider Institution	
Name	
Position	
Recommendation	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%; padding-left: 10px;"> <input type="radio"/> Recommended </div> <div style="width: 45%; padding-left: 10px;"> <input type="radio"/> Not recommended </div> </div>

If not recommended, please provide explanation:

Signature											
Date	<table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y		

Dean or School Delegate

Name		Date	<table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y				
Signature		Date student or partner notified	<table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 20px; height: 20px; text-align: center;">D</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 20px; height: 20px; text-align: center;">M</td> <td style="width: 10px; text-align: center;">/</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> <td style="width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	/	M	M	/	Y	Y	Y	Y
D	D	/	M	M	/	Y	Y	Y	Y				

