



# Assessment Adjustment Request

2025

Yr 11 & 12

To be completed by student and discussed with subject teacher. Completed form given to Teacher and then onto Assistant Principal – Learning and Teaching for final approval. A new application is required for each subject and assessment item. (*Internal Assessment Items only. Used in conjunction with SMC Assessment Policy*).

<b>Name:</b>		<b>Year Level:</b>		<b>PC:</b>	
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I have an approved AARA application:     No (cont.)     Yes (go to AA request section)

### Reason for request

- Illness and misadventure
- Other: \_\_\_\_\_

### Documentation provided

- Medical Certificate (Year 11 – U1 and U2)
- Medical Report (U3 and U4 - collect from Learning Enhancement or AP Curriculum)
- Other: \_\_\_\_\_

### Assessment Adjustment (AA) request

- Extension
- Comparable exam (unable to sit scheduled exam)
- Scribe (due to injury)
- Extra time (QCAA approval required).                       Rest Breaks (QCAA approval required)
- Other: \_\_\_\_\_

### Details

Subject:		Assessment Item:	
Student signature:		Date:	

### Office Use only (Teacher and Assistant Principal)

- Checkpoints     Draft     Approved - Negotiated date: \_\_\_\_\_
- Not approved - comments: \_\_\_\_\_

FA1     FA2     FA3     FA4                       IA1     IA2     IA3     IA4 (Ess. only)

Teacher Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Final Approval     QCAA Applied / Contacted

Assistant Principal Curriculum signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>OFFICE USE ONLY</b>			
<b>Final teacher to give completed form to Assistant Principal - Curriculum.</b>			
Copy emailed to Student	<input type="checkbox"/>	Update spreadsheet	<input type="checkbox"/>
Copy emailed to Teacher	<input type="checkbox"/>	Original placed in Data Administrator files	<input type="checkbox"/>
Copy emailed to Learning Leader	<input type="checkbox"/>		