



Assessment Extension, Change of Date & Adjustment Application

This form is used if a student is unable to access an assessment due to:

- a representative activity
- an unexpected serious event or circumstance
- a temporary illness or injury.

This application must be submitted no later than **48 hours** before the assessment due date, unless in exceptional circumstances. **Please note:** Granting of requests are not automatic and will be considered based on the evidence provided and the school's assessment policy.

Student Name: _____ Year Level: _____

Application Types:

- **Assessment Adjustment:** Adjustments to how an assessment is completed due to a temporary medical condition (e.g. extra time in exams, rest breaks, scribe, assistive technology, or modified response method).
- **Extension (Assignment):** Additional time to complete and submit an assignment.
- **Change of Date (Exam):** Request to sit an examination at a later date.

Subject/s application applies to:

Subject	Assessment	Current Due Date	Application Type	Requested Change/Support

Please continue to the next page.

Reason for Application:

Describe the illness, medical condition, or unexpected event: _____

Date of diagnosis / onset / occurrence: _____

Explain how this may affect/affected your ability to prepare for or complete this assessment:

Please continue to the next page.

Supporting Documentation (place an X in the appropriate box)

- Letter of confirmation of selection for representation.
- Supporting documentation for event
- Medical certificate/letter/report
- Other evidence:

Please include any supporting documentation with your application.

Parent/Carer signature: _____ **Date:** _____

Submission

Submit the completed form using one of the following methods:

- Email the completed form to ParentSupport@pbc-shs.eq.edu.au.
- Students may submit applications directly to the relevant Head of Department (HOD).
- Years 7–9: Provide a printed copy to Junior Secondary Student Services (A Block).
- Years 10–12: Provide a printed copy to Senior Secondary Student Services (Y Block).

Completed by HOD

Change Authorised:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
HOD Comment:		
_____ _____		
HOD signature/stamp: _____		
1. Record the contact in OneSchool. Suggested entry: Change of Date / Extension / Assessment Condition Support request: Approved / Not approved (include reason if not approved).		
2. Notify outcome: Email the parent/carers, teacher and student informing them of the outcome.		