

MOUNT ANNAN HIGH SCHOOL

Junior (Year 7-9), ROSA (Year 10), Preliminary HSC (Year 11) and HSC (Year12)

Illness/ Misadventure/ Extension/ School Approved Activity

Form

SECTION A – Student Details							
Student Name: Year Group: [Date of form submission:				
SECTION B – Assessment Task Details							
COURSE	ASSESSMENT TASK AND NUMBER			WEIGHTING	DUE DATE	SUBMITTED Y/N	
SECTION C – What is the nature of the application				n (indicate with a tick)			
0 Misadventure	0 Illness			xtension 0 School Approved Activity			
 Student Sig			 	arent/Guardia	n Signature		
Section E Head Teacher Recommendation			(indicate with a tick)				
Date Received Comments			relevant to	0 Upheld		0 Declined	
Head Teacher Signature:							
Section F Deputy Principal Decision			(indicate with a tick)				
Date Recei Comments		tation with th		0 Upheld acher and Class	s Teacher, wher	0 Declined e applicable.	
Deputy Principal Signature:			Date:				
<u>Note</u> : If the appli	cation is declined yo	ou have the rig	ht to Appe	al the decision	n. Appeal form h	anded out by	

Head Teacher?