

APPLICATION
SPECIAL CONSIDERATION
UCSSC Lake Ginninderra 2019

PERSONAL DETAILS

Name: _____ Year: 11/12 Course:
Tertiary/Accredited (circle)
SG: _____ Year Advisor: _____ Date of application: _____
Mobile no: _____

PERSONAL STATEMENT

BRIEF DESCRIPTION OF THE ILLNESS, ADVERSITY OR EVENTS BEYOND YOUR CONTROL. Give a brief description of your circumstance. Please use the back of the page if you need more space.

If you feel uncomfortable about writing a personal statement, you can make an appointment to see the School Counsellor to discuss your personal situation with her.

I have discussed/will discuss concerns with the Counsellor/Year Advisor/Executive Teacher Student Services YES/NO (please circle)

STATE THE PERIOD ILLNESS/ADVERSITY/OR EVENTS IMPACTED ON MY COLLEGE WORK:

Start date _____ Finish Date _____

SUPPORTING DOCUMENTATION

1. ATTACHED 2. NOT ATTACHED 3. WILL BE PROVIDED by _____(date)
4. NOT PROVIDED - I will now see the School Counsellor, a Year Adviser or the Executive Teacher of Student Services (please circle one)

PEOPLE WHO COULD PROVIDE VERIFICATION OF MY SITUATION/ADDITIONAL INFORMATION IF NEEDED (Please give name/s and phone contact details):

IMPACT OF THE ILLNESS, ADVERSITY OR EVENTS ON MY WORK

State clearly how the situation has affected your attendance and/or assessment
eg attendance, work not completed, underperformed, work not submitted, exams/tests not completed, need for extension without penalty, other. Please specify any work not completed

Line	Subject	Teacher	Absences & Outstanding Assessment

STATEMENT OF UNDERSTANDING

1. I declare that the information provided by me is correct.
2. I understand that I have to inform student services if my circumstances change.
3. I understand that I can come to Student Services to seek assistance with any matters related to my attendance or assessment at any time and that it is my responsibility to do so.

Note - Special Consideration will not alter grades or guarantee passing grades but provides support to students with specific needs.

Signed: _____

Date: _____