

## Special Consideration Form

Please use Block/Capital Letters. When questions are not applicable to your circumstances, please specify with "N/A". Please tick all relevant boxes where they are applicable.

For the deferral of assessment submission including practical observation, please submit this form **NO LATER THAN THREE WORKING DAYS** after the due date, unless compassionate and compelling circumstances (See the definition of compassionate and compelling circumstances in the *Assessment Policy and Procedure* at <https://aibtglobal.edu.au/support/student-forms/policies/>). You are required to attach supporting evidence (e.g., medical certificate) with your application.

Part A – Student				
STUDENT DETAILS – The student must complete this section.				
Student Number:				
Title:				
Surname/Family name:				
First name:				
Second/Middle name:				
Qualification/Program:				
Phone (Home):				
Phone (Work):				
Phone (Mobile):				
Email:				
SPECIAL CONSIDERATION REQUIRED FOR ASSESSMENT EXTENSION SUBMISSION (Provide CORRECT unit code and name in BLOCK LETTERS)				
Unit code	Unit name	Assessment name	Assessment due date	Trainer's name


**Any other requests for special consideration:**

## Part A – Student (continued)

### DESCRIPTION OF CIRCUMSTANCES

Please tick all relevant boxes where they are applicable and clearly state the circumstances that have an impact on your studies. You must state the affected duration (in days, weeks or months). **YOU MUST ATTACH SUPPORTING DOCUMENT/S** (e.g., medical certificate, letter from a health counsellor).

<input type="checkbox"/> Serious illness (please attach a medical certificate)	<input type="checkbox"/> Death or serious illness of immediate family member (Please attach a letter from a counsellor, doctor or health practitioner indicating the condition. Please provide the proof of the relationship between the family member and the student)
<input type="checkbox"/> Crisis/trauma (Supporting evidence may include a medical certificate or other documents from a counsellor, doctor, or the police depending on the nature of the issue. The evidence must demonstrate the severity and/or gravity of the circumstance which can impact the student's studies)	<input type="checkbox"/> Mandatory commitments (The student has unavoidable commitments such as jury duty, court appearance, military reserve activities and, emergency service commitments. Please attach documentation showing compulsory attendance dates)

**Other compassionate and compelling reasons:**

### STUDENT DECLARATION

I declare the details I have supplied to be accurate, true and correct.

Student Signature:		Date:	
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Part B – Staff			
<b>(Step 1) Student Support Team</b>		<b>(Step 2) Quality Assurance</b>	
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
Officer's Name:		Officer's Name:	
Date:		Date:	