

UNIVERSITY OF WOLLONGONG
School of Mathematics and Applied Statistics

APPLICATION FOR SPECIAL CONSIDERATION

For students who have missed a tutorial class or examination, or who have failed to submit on time an assignment or other due work, because of a substantial medical, personal or other reason.

Complete ONE form per subject per request.

FAMILY NAME

OTHER NAME(S) STUDENT NUMBER

ADDRESS

SUBURB POSTCODE

CONTACT PHONE NUMBER -

SUBJECT NUMBER: SUBJECT NAME:

CLASS TIME : LECTURER/TUTOR:

Circle the number below of the week of session, otherwise describe the period concerned, and **write** the date(s) for which you request consideration.

1 2 3 4 5 6 7 8 9 10 11 12 13 14

Description of period of time consideration is requested:

Date(s) consideration requested:

I hereby apply for special consideration for (more than one box may be ticked)

- failing to submit an assignment on time
- not attending my laboratory class / tutorial class / lecture
- missing an Examination
- illness during an Examination for.....
- other event (specify).....

The reason for this application is

(Supporting documents or further explanation to be attached.)

What I would like to happen as a result is.....

Signed: Date:

Submit this form to the SUBJECT CO-ORDINATOR or the Departmental Secretary.

SCHOOL USE ONLY

ACTION:

Signed:

Subject Co-ordinator

Date