

Illness / Misadventure Form

First Name:	Surname:	
Year:	Subject:	
Task Type:	Task Number:	
Teacher's Name:		Due date:///
I wish to inform the school of the following circumstances which affected my performance in the above Assessment Task.		
 Please tick one (or more) Circumstances prior to the Assessment Task affected my preparation for this task I was absent on the day of the Assessment Task I attempted the Assessment Task but was unable to complete it to my usual standard Other 		
Reason (if insufficient space, also write on the back of this page):		
I have notified the Head Teacher of I have attached supporting docum Student Signature: Parent Signature:		Yes / No Yes / No Date:// Date://
STAFF USE ONLY Outcome Student is to be awarded 'Unable to Assess' Student is to be awarded the grade they achieved in the Assessment Task Student is to hand in / sit for the Assessment Task on Student is to be given an estimated grade. Comment:		
Head Teacher Signature:		Date://