Years 7 - 10 AARA Application Form

Short-Term AARA – Assignment Extensions and Missed Exams

STUDENT NAME:	YEAR LEVEL:	DATE:

Type/s of Adjustment Required (select from the reasons below):	
☐ Extension of time for assignment/s	☐ Absence from a scheduled exam
☐ Other (Please specify):	

Reason for Application (please select)	Required Evidence
☐ Bereavement	Parent/caregiver note outlining special circumstances
☐ Illness	Medical certificate
☐ Misadventure (unavoidable incident)	Parent/caregiver note outlining special circumstances
☐ School Activity (e.g. Sport, Performing Arts)	Confirmation of participation in sporting event
☐ Social/Emotional	Medical certificate or written endorsement from Guidance Office/YSC

Parent / Caregiver Acknowledgement

I have discussed the grounds for this application with my child and I support the request for additional support. I acknowledge that this is a request that is subject to approval from the JS or MS HOD in line with school assessment policy.

STUDENT SIGNATURE AND DATE	PARENT/CAREGIVER SIGNATURE AND DATE
Date: ___/___/_____	Date: ___/___/_____

Assessment Information

Please provide details of each assessment task that requires adjustment under this Short-Term AARA.

Your teachers will discuss possible adjustments and deadlines with you after you have submitted your AARA application.

Subject	Teacher	Lessons Missed	Original Due Date
1.			
2.			
3.			
4.			
5.			
6.			

Submit Your Application

Please return a printed copy of this form to the JS or MS Head of Department in E Block or via email to aara@macgregorshs.eq.edu.au.

Date received by school:_____ Staff signature:_____