



RUNCORN STATE HIGH SCHOOL

Application for Variation to Assessment

STUDENT and PARENT TO COMPLETE

Student Name: _____ Date of Application: _____

Subject: _____ Teacher: _____

Task: _____ Due Date: _____

- Access arrangements and reasonable adjustments for Year 11, Units 1 and 2
- Unit 3 and/or 4 (Year 11/12) – internal assessment
- Year 7 - 10

Requesting:

- Extension
- Variation to exam date
- Exemption from Assessment

Reason: _____

Documentation:

- Medical certificate (attached)
- Other (attached): _____

Student signature: _____

Parent Acknowledgement: I have discussed the grounds for this application with my child and I support the request.

Parent Signature: _____

SENIOR SCHOOLING STAFF TO COMPLETE

- Unit 1 and/or 2 Unit 3 and/or 4

Guidance Officer/ SS DP / SS HOD Comment: _____

Signature: _____ Date: _____

Period to be Considered: _____

HEAD OF DEPARTMENT TO COMPLETE

- Check with class teacher regarding student work ethic (attendance, effort in class, homework etc.)
- Draft has been completed, marked and returned (if applicable)
- Check progress/ evidence of work done on the assessment item at the time of this application
- Application not approved – Reason/s: _____
- _____
- _____

- Application approved – see below for details:
- Extension – Draft due: _____ Final due: _____
- Variation to exam date – Revised exam date: _____

Time: _____ Location: _____

- Exemption from assessment

HOD Signature: _____ **Date:** _____

- HOD ACTIONS Teacher advised of outcome
- Entered on OneSchool / Support / Support Provisions

PRINCIPAL OR PRINCIPAL'S DELEGATE TO COMPLETE**Unit 3 and/or 4 Assessment Tasks Only**

- Final Approval

Principal or Principal's Delegate's Signature: _____

Date: _____

- ACTION Uploaded to QCAA Portal