



ASSIGNMENT EXTENSION REQUEST



The student is to complete all details and submit to their subject teacher with specific evidence attached.

Student:	Year:	Form:
Teacher:	Subject:	Date:

HEAD OF DEPARTMENT:

TEACHERS USE ONLY:	HEAD OF DEPARTMENT:
<p>Please initial the boxes to indicate that the Gladstone State High School Assignment Policy has been carried out in respect to the following for the student (above) :</p> <ul style="list-style-type: none"> a clear specific statement of objectives has been given. a clear and specific statement of procedures has been provided. Information on the availability and location of resources has been explained. A clear definition such as length, structure, time, method of presentation, emphasis on various sections required has been provided. Specific dates for presentation of drafts and final copy has been given. The contribution to the overall assessment and the standards required for specific levels (including the showing of examples/models) has been explained. <p>Teacher's Comments:</p> <p>.....</p> <p>.....</p> <p>Teacher's Signature:</p> <p>.....</p>	<p>APPROVAL:</p> <p>1. EXTENDED ABSENCE: (supported by acceptable evidence)</p> <p>New Due date: / /</p> <p>2. ABSENT ON DUE DATE: (supported by acceptable evidence)</p> <p>New Due date: / /</p> <p>3. EXTENSION GRANTED FOR EXCEPTIONAL CIRCUMSTANCES: (supported by acceptable evidence)</p> <p>New Due date: / /</p> <p>.....</p> <p>Head of Department's signature.</p>

WHERE EXTENSION IS NOT GRANTED:

Head of Department Comments:

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Principal's Comments:

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Principal's Signature