Special Consideration Application Form - Higher Education

This document is to be used by students to apply for Special Consideration for circumstances where the normal application of the College’s policies require special consideration.

* The Special Consideration Policy - Higher Education **must** be read prior to completing this form to see a range of examples that may be used under each ‘Reason for Application’ and the relevant documentary evidence required under each reason. The Policy is available on the College’s website.
* Reasons must be due to circumstances beyond a student’s control and **supported by documentary evidence**.
* It is important to note that Special Consideration will not apply in the following situations:
  + You have an **existing** or **ongoing** medical condition prior to commencement which you are aware could impact your academic performance. For existing conditions students should register for the Access and Equity Program through Student Services.
  + A student ‘changing their mind’ about studying at the College and wishing to withdraw without academic penalty;
  + A normal change in work arrangements such as a change of shift or planned holiday;
  + A lack of knowledge of the College’s Policies and Procedures;
  + Any holiday arrangements or social / leisure / personal commitments made by the student within a calendared study period (including overseas travel and school holidays);
  + Faulty technology; or
  + Misreading timetables or forgetfulness.
* Any applications related to remission of fees of debt of any kind should be made under the provisions of the Remission of Fee Liability due to Special Circumstances Policy – Higher Education.
* This form and **certified** copies of the relevant documentary evidence must be submitted through Student Services at your local campus or via email to [HEsupport@martin.edu.au](mailto:HEsupport@martin.edu.au). All documentation must be submitted together to be considered a complete application.
* It is recommended that students discuss their application and the required documentary evidence with their Student Adviser prior to the submission of their application to avoid delays in processing.

1. PERSONAL DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| Student Number | | Date of Birth | |
| Title | Given Name | Family Name | |
| Address | | | |
| Suburb | | State | Postcode |
| Phone Number | | Additional Phone | |
| Email | | | |

1. STUDY DETAILS

|  |  |
| --- | --- |
| Course | |
| Expected Year of Completion | Campus |

1. SUBJECTS

|  |  |  |  |
| --- | --- | --- | --- |
| Subject Code | Subject Name | Teaching Period | Census Date |
|  |  |  |  |
|  |  |  |  |
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1. REQUEST

|  |  |  |
| --- | --- | --- |
| Academic Penalty Removed | Deferred Examination | Extension of Written Assessment |
| Other (please specify) | | |

Reason for Application: **Due to circumstances beyond my control, I am unable to continue my studies or have been unfairly disadvantaged by the normal application of College policies for the following reason**:

(Please tick whichever is applicable)

|  |
| --- |
| **Medical reasons** (medical certificate **must** be attached from a registered medical practitioner)  Due to unforeseen medical reasons, you are unable to attend an assessment or required clinic session, to submit an assessment item when due or you are an international student and unable to fulfil attendance requirements. |
| **Family / personal reasons** (you **must** attach supporting documentation from a qualified professional)  Due to unforeseen personal/family reasons that occur or worsen and that are beyond your control, you are unable to attend an assessment or required clinic session, to submit an assessment item when due or you are an international student and unable to fulfil attendance requirements. |
| **Other** (you **must** supply supporting documentation)  The circumstances under which an application for special consideration can be made are not limited to those listed above; rather any an application may be made when the circumstances are outside of the usual application of any other College policy. It is the student’s right to submit a special consideration application for any reason (with supporting documentation to substantiate all claims). |

Please provide details for whichever reason you have selected above:

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| --- |
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\***Please note:** if you are unable to supply sufficient supporting documentation for any reason, you may be required to provide a [Statutory Declaration Form](https://source.endeavourlearninggroup.com.au/Public%20Documents%20Library/DOCID-3-373.pdf) to support your case for Special Consideration.

1. DECLARATION

I (the undersigned), declare that: *(tick)*

|  |  |
| --- | --- |
| I have read and understood the policies related to this form and that the information I have provided within this document is true, correct and complete in every respect. | |
| I have attached all **certified copies** of the originals for supportive documentation (no originals will be accepted). I acknowledge that the submission of false, incorrect, incomplete or misleading information may result in cancellation of my enrolment and/or delays in processing this request. | |
| I acknowledge that the Policies and Procedures have been made available to me online and I have read, understood and accepted these as conditions of my enrolment including the Special Consideration Policy - Higher Education. | |
| Name | |
| Signature | Date |

**PRIVACY:** For details of College practices regarding student information and privacy see <http://www.martin.edu.au/degrees/he-policies>

**OFFICE USE ONLY**

|  |  |  |  |
| --- | --- | --- | --- |
| Date received by SS | Received by name | | Application recorded in SMS |
| Date sent to Senior Student Adviser | | | Decision entered in SMS |
| Approved  Denied | Date decision made | | Decision notice emailed to student |
| Decision maker name | | Decision maker signature | |
| If denied, please state the reason/s supporting the decision | | | |
|  | | | |