



## SPECIAL CONSIDERATION FORM

### Application Fees

The Special Consideration application and assessment fee is \$50.00\*. Please note that once a candidate completes this form and pays the applicable fees, there are no refunds available (regardless of the outcome). All fees must be paid PRIOR to any actions being taken or applications will not be considered.

### Area of Request:

- Absence from class medical reasons\* (\$50 admin fee does not apply on production of valid medical certificate within 3 days of absence)
- Absence from class non-medical
- Late submission of assessment before marks released
- Financial hardship / payment of fees
- Other: (please specify) \_\_\_\_\_

For more information on special consideration, please refer to *1-03-001 Student Handbook (available on the website)*.

- For application of leave during a course please refer to *1-03-038 Permission of Leave Request Form (applicable to international students only)*
- For late submission of assessment after marks released please refer to *1-03-046 Late Submission or Resubmission of Assessment Application Form*

## STUDENT DETAILS

<b>Title:</b> <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss	<b>Student's Full Name:</b> (as in passport)
<b>Course Enrolled In:</b>	<b>Student's ID:</b>
<b>Date/s of absence:</b>	
<b>Subject/s related:</b>	
<b>Description of your request:</b>	
<b>Supporting document included: (Medical certificate etc)</b>	



**Payment Options**

<input type="checkbox"/> Cheque	Made payable to Kenvale College
<input type="checkbox"/> Credit Card – please provide details	Card Type (please select) <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa
	Card holder name/s:
	Credit card number:
	Expiry date:
<input type="checkbox"/> Bank Deposit	Bank account details: Bank Name: Commonwealth Bank Bank Address: Library Walk, Kensington NSW 2033 SWIFT code:CTBAAU2S Account name: Kenvale College BSB no. 062 303 Account number: 1006 7300

Please email this form to [studentservices@kenvale.edu.au](mailto:studentservices@kenvale.edu.au) along with all supporting documentation or hand it in with payment.

I hereby confirm that the above is true and I am submitting this form with relevant supporting documents and payment of \$50\*

Student Name:	Student Signature:
Date:	



## FOR OFFICE USE

### Submission Checklist (Student Services)

- Supporting document/s
- Fees paid
- Date/s of absence is checked
- Subject/s related completed

### ACTION/S TO BE TAKEN

Please list the actions to be taken upon receipt of request and other relevant facts that may have an impact on the decision:

### DECISION MADE

Request approved       Request not approved       Request pending

Further comments:

### APPROVAL GRANTED BY:

Full Name:

Signature:

Position:

Date: