SUBMIT TO STUDENT ADMINISTRATION

Student Administration
University of the Sunshine Coast – ML23
Locked Bag 4
Maroochydore DC QLD 4558

University of the Sunshine Coast

APPLICATION FOR DEFERRED EXAMINATION

Instructions – read before completing this form

- This application is to be used by students seeking a deferral of their final examination held during the centrally scheduled examination period.
- This application **must** be supported by the required documentation (see below).
- This application must be lodged with Student Administration prior to or within three (3) working days after the examination date.
- If you completed your final examination but consider that your performance was affected by short-term illness or other exceptional circumstances outside your control, you should apply to your course coordinator for special consideration. A special consideration form should be used and is available from your faculty administration

PERSONAL DETAILS

1	0								
Student ID							Family Name / Surname		Given Name/s

Contact Telephone Numbers:	Business Hours		After Hours / Home	
	Mobile			
USC Email Address	@student.usc.edu.au			

COURSES

Course Code						Course Name	Examination Date

GROUNDS FOR DEFERRED EXAMINATIONS

The following **are** acceptable grounds for applying for a deferral of an examination. They must be accompanied by documentation as required (see below). Please indicated basis of application:

- ☐ illness or serious health problem
- ☐ serious personal trauma
- ☐ a cultural or sporting commitment at State, National or International representative level
- ☐ jury duty
- ☐ Defence Forces Reserve commitments
- ☐ serious incapacity during the central examination period
- ☐ religious obligations
- ☐ exceptional family, work or personal circumstances

The following **are not** acceptable grounds for applying for a deferral of an examination:

a. holiday arrangements including international students returning home;
b. misreading an examination timetable; or
c. social and leisure events including sporting or cultural commitments not at State, National or International representative level.

SUPPORTING DOCUMENTATION

Students applying for deferral of an examination on medical grounds must supply the following supporting details. A medical certificate without these details **will not** be accepted.

a) an original certificate or letter on letterhead from a medical or dental practitioner, a registered psychologist or psychiatrist, depending upon the nature of the illness;
b) the date on which the practitioner examined/spoke with the student;
c) the general nature, severity and duration of the complaint (where appropriate); and
d) that in the practitioner's opinion, the student was not fit to sit an examination on that day.

Students applying for deferral of an examination on other grounds must provide certified documentation. This would include:

- Compassionate/personal trauma – eg death or serious illness of a close family member or friend. Victim of crime/accident. Supporting evidence must be provided. This may include a letter from a doctor, counsellor, funeral director, or police officer depending on the situation.
- Cultural/sporting/Defence Force/jury duty. Supporting documentation formally confirming the dates of the activity and the student's requirement to attend.
- Religious obligation. Documentation to confirm the student's recognised affiliation with the religious group.
- Exceptional work commitments. Documentation from an employer to confirm the nature of the work commitment to be undertaken at the time of the examination and why it is unavoidable. Note that ordinary work commitments will not be accepted as a reason for a deferred examination.

STATEMENT OF CIRCUMSTANCES

All students applying for a deferred examination must provide a brief statement of circumstances: (if insufficient space, please attach additional pages)

STUDENT DECLARATION

- I accept that I must be available to sit any approved deferred examinations during the Deferred/Supplementary examination period specified at: http://www.usc.edu.au/Students/Current/Study/Exam/
- I authorise staff from the University, where applicable, to obtain a confidential report from the Medical Practitioner using the medical certificate.
- I authorise the Medical Practitioner issuing the medical certificate, where applicable, to provide a confidential report to staff from the University on request.
- I understand that I will be notified of the outcome via email.
- I certify by my signature that all the information I have supplied is true and correct. I acknowledge that disciplinary action may be taken if I knowingly supply false or misleading information.

Student's Signature: _____ Date: _____

OFFICE USE ONLY – STUDENT ADMINISTRATION

☐ **Approved** ☐ **Not approved**

Reason why application not approved:

☐ Email notification sent to student on ____/____/____

Signature: _____ Date: ____/____/____

Name: _____