

## Special Consideration and Appeals

#### **Special Consideration**

When students experience circumstances that significantly affect their ability to fulfil their academic requirements due to circumstances beyond their control and preventing them from completing an assessment task to the best of their ability or by the due date, they may *apply for Special Consideration* for the *specific assessment tasks* that were affected.

All applications for special considerations shall be submitted no later than 3 days after the assessment due date.

Special circumstances include situations such as: ill-health, medical or other emergency, bereavement, trauma, hardship or an unexpected critical incident.

If an application for special consideration is approved, students may be offered a study adjustment such as:

- Extension, deferral or resubmission of an assessment task
- A supplementary assessment
- Approved alternative arrangements for assessments
- · Re-weighting of shorter assessment tasks without reducing learning outcomes
- · Authorised late withdrawal from a subject

#### Appeals

When students seek to appeal assessment outcomes, they may do so through the following processes:

- Contacting their lecturer to request a re-mark of the assessment task
- Contacting the Course Coordinator to request double marking of the assessment task (in which case, the second mark shall be the final mark)
- · Contacting the Course Coordinator to contest the final grade received for a subject
- Lodging a complaint via the procedure outlined in the Student Grievances, Complaints and Appeals Policy and Procedures

This form can be used to make:

• A formal application for special consideration.

To make a formal Appeal to seek assessment outcomes

• Please fill in the Complaint and Appeal Application Form.

## YOUR PERSONAL AND LEA COURSE DETAILS

Title:	Family Name: Given Names:			
Student ID:	Contact Phone Number: Email:			
Course Code:	Couse Name:	Lecturer:		
Subject Code:	Subject Title:	Course Coordinator:		

# **SPECIAL CONSIDERTION APPLICATION FORM**



## ASSESSMENT DETAILS (TO BE COMPLETED BY STUDENT)

Assessment Task Details:

Due Date:	 		

Reason For Requesting Special Consideration:

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### **STUDENT DECLARATION**

Please read the statement below and check the box in acknowledgement.

□ I have read the LEA Assessment Policy, Examinations Policy and Procedures, Moderation Policy and Procedures, LEA Student Grievances, Complaints and Appeals Policy and the LEA Student Grievances, Complaints & Appeals Flowchart and understand the process, potential consequences and outcomes of lodging this complaint.

All complaints related to academic matters are to be sent to the Course Coordinator.

We will endeavour to contact you as soon as possible regarding your application.

If you are unhappy with the way your complaint is handled, you may be able to appeal the outcome internally.

For further information please refer to the Student Grievances, Complaints & Appeals Policy, or contact the Student

Experience Manager.

I declare that the information provided by me is true and complete. I acknowledge that LEA reserves the right to confirm the information provided and may vary or reverse any decision regarding special consideration on the basis of incorrect or incomplete information. I hereby give consent for LEA to contact my treating practitioner and/or other person or organisation named in any supporting document to confirm / clarify the information provided and for the practitioner or other person/organisation to provide information relevant to my request for special consideration. I agree to provide a more specific consent to disclose any of the information provided, should this be required by the organisation.

Signed: \_\_\_\_

Due Date: \_\_\_\_\_

Privacy Notification: Personal information collected on this form will be used to process and investigate you application. Only the people who are directly involved in the process will have access to information about the application. This application and further communications that form part of the application will be stored securely at LEA. You have the right to request access to Speciab@considerationcApplication Form | LEA-GEN-STU-42013-D Page 2 of 3 LEA |TEQSA Provider ID: PRV14352 | CRICOS Provider ID:



Completed forms should be sent to the:

Course Coordinator Lincoln Education Australia 144A Marsden Road Ermington NSW 2115 Email: <u>coursecoordinator@lea.edu.au</u>

For Office Use Only				
Date Received:				
Referred to:	Date Referred:			