

# Advice of Absence or Other Circumstances For Undergraduate Students only

Family Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
 Degree: \_\_\_\_\_ (eg BA, BCom-Accg) First Name: \_\_\_\_\_  
 Division of Registration: \_\_\_\_\_ (eg EFS, HUM)  
 Contact Email: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

### Important Information

- This form must be submitted **before the last day of classes** in each semester.
- This form is to be used for any absences or circumstances affecting study during the semester. *Special Consideration forms are only available during the final examination periods.*
- Please attach documentation where applicable (eg medical certificate). Documents submitted to the University become the property of the University and will not be returned to the student. **Certified photocopies are strongly recommended.**
- If the disruption affected an exam or submission of an assignment, please contact the unit convenor.
- No acknowledgement of receipt of this form will be sent.

### Lodgement Steps to be followed by the student:

1. Complete this form and attach any documentation (if applicable).
2. One copy is to be submitted to the Student Enquiry Service, Lincoln Building Level 1.
3. One copy is to be submitted to each Division (not Department) that is affected by the absence/circumstances.
4. If an exam or submission of an assignment is affected, please contact the unit convenor *in addition* to submitting this form.

Unit Code	Date(s) affected	Missed Lectures	Missed Tutorials	Missed Class Test during Semester	Unable to Submit assignment
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Other circumstances that have affected study during the semester

Please explain (or attach documentation):

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Documentary evidence attached?      Yes       No

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Date*

Date Received: