

ST JOSEPH'S COLLEGE LOCHINVAR
**SUMMATIVE ASSESSMENT
VARIATION FORM
YEARS 7, 8, 9**



- PLEASE TICK THE RELEVANT BOXES BELOW
- COMPLETE NECESSARY INFORMATION AND SIGN
- ATTACH ANY SUPPORTING EVIDENCE (IF APPLICABLE)
- SUBMIT THIS FORM TO YOUR CLASSROOM TEACHER

Please note: In some circumstances, supporting evidence or documentation may need to be provided (eg. Medical Certificate)

Absence from a Summative Assessment Task

INSTRUCTIONS:

ILLNESS

Submit this form on the **FIRST** school day of attendance after the due date of the Summative Assessment Task

UNFORESEEN ABSENCE

Submit this form on the **FIRST** school day of attendance after the due date of the Summative Assessment Task (eg. Funeral, etc)

Special Consideration for a Summative Assessment Task

INSTRUCTIONS:

Submit this form on the **DAY OF THE TASK** or the **FIRST** school day of attendance after the due date of the Summative Assessment Task

Note: Special consideration may be applied for on the day of a Summative Assessment Task if it is believed that illness/misadventure has impacted/will impact the student's result for the Summative Assessment Task.

Late Submission of a Summative Assessment Task

INSTRUCTIONS:

Submit this form with the Summative Assessment Task when it is submitted to the classroom teacher

SECTION 1: Completed by the Student/Parent

Name: _____ Year Group: _____

Course: _____

Assessment Task Title: _____

Assessment Task No: _____

Weighting of Task: _____

Task Due Date: _____

Date of Submission: _____

Detailed Reason for the submission of the Summative Assessment Variation Form:

YES NO Supporting Evidence attached (eg medical certificate, funeral notice, etc)

Student Signature: _____ Date: _____

Parent/Guardian
Signature: _____ Date: _____

SECTION 2: Completed by the Classroom Teacher

Date Received: _____

Signature: _____

Comments: _____

SECTION 3: Completed by the Studies Coordinator

Date Received: _____

Signature: _____

OUTCOME: NO PENALTY 25% 50% A MARK OF ZERO

Comments: _____
