

MISSED ASSESSMENT FORM

PART A (student to complete)

Person who missed the Assessment

Name:	Atawhai Group:
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Subject / Level (NCEA 1, 2 or 3) / Subject Teacher

Subject:	Level:	Teacher:
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Achievement Standard No. and Title

AS	Title:
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Date Assessment was Issued/Set

Date Assessment Due

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Reason for not being in class on date or missing the hand in time/date

Student Signature:	Parent Signature:
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PART B (Subject Teacher to complete and hand to Head of Department)

Parent/Guardian Letter Attached

Medical Evidence Attached

Yes / No	Yes / No
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This reason appears to be:

Acceptable:	In need of further investigation by HOF:	Not Acceptable:
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PART C (Head of Department to complete)

Decision made:	Tick if applicable:
It has been noted that you missed an assessment. Your reason is unacceptable and no further assessment opportunity will be offered to you.	Tick if applicable:

Signature HOD:	Date:
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The HOD will copy this form for the student concerned, notify the subject teacher of the result, file the form in accordance with the policy.

- copy to Dean copy to SR