

# Special Consideration Application Form

## POLICY GUIDELINES

Kaplan is dedicated to providing fair, equitable, consistent and transparent assessment practices for all students. Kaplan understands that occasionally due to illness, misadventure or adverse personal circumstances beyond their control, students may be prevented from:

- Completing an assessment task by the due dates or attending an exam, or
- Completing an assessment task to the best of their ability.

In recognition of this, Kaplan has set in place procedures that allow students to apply for special considerations for those assessments they believe are affected by any of the above circumstances.

Students have a responsibility to act honestly and truthfully when applying for special consideration. Any student suspected of submitting a false or misleading application for Special Consideration will be investigated in accordance with Kaplan's misconduct policy [www.kaplanprofessional.edu.au](http://www.kaplanprofessional.edu.au)

## ELIGIBILITY FOR SPECIAL CONSIDERATION

Students may apply for special consideration if unanticipated events (e.g. illness, bereavement, personal trauma, significantly increased workload at the student's place of work etc.) during the study period impact the student's capacity to attempt or complete an assessment item to the best of their ability. Students who are uncertain about their eligibility should contact a Student Experience Advisor on 1300 135 798 for further information.

## SPECIAL CONSIDERATION WILL NOT BE CONSIDERED FOR STUDENTS

- Who fail to note correct assessment dates and times
- Who submit incomplete or inadequate supporting documentation
- Who take annual leave and/or personal holidays during the study period
- Who anticipate a change of employment
- Who are unable to locate an independent supervisor
- Who attend events (e.g. conferences, weddings) during the study period.

## SPECIAL CONSIDERATION MAY BE DECLINED IN THE FOLLOWING CIRCUMSTANCES

- Applicants made after assessment date
- With computer related problems (supporting evidence from IT service must be supplied)
- Who submit requests outside the designated time frames
- Who have brief illnesses of less than seven (7) days prior to the assessment.
- Who wish to reapply to change the outcomes of a previously approved application within the same study period.

While these lists are not exhaustive, it outlines common reasons why students apply for special considerations. Each application will be assessed on its merit.

## HOW DO I APPLY FOR SPECIAL CONSIDERATION?

Students wishing to apply for special consideration must complete their application, including relevant supporting documents and submit to their Student Advisor prior to the upcoming assessment event and within 48 hours of the relevant incident occurring.

Applications for special consideration will not be considered after 48 hours unless evidence can be provided that the request could not be submitted within the time frame.

Students must:

- Complete and sign the application form for Special Consideration (Appendix 1).
- Attach all relevant documentation to support their circumstances (e.g. legal documents, death certificate etc.).
- For medical circumstances, a medical practitioner is to complete Appendix 2.
- Submit the application form to your Student Advisor and keep a copy of the application and all relevant documentation submitted.

## HOW IS THE APPLICATION PROCESSED?

Students will receive a confirmation email from their Student Advisor that their application has been received and is complete. The application will be forwarded with a recommendation to the Manager, Student Resolutions, or their delegated authority for consideration. After timely and fair consideration, Kaplan will notify the student in writing of the outcome.

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### POSSIBLE OUTCOMES OF A SPECIAL CONSIDERATION APPLICATION

Assessment extension may be granted for:

- Examinations - The extension will correlate to the number of days stated in the medical certificate from the doctor. A maximum extension of up to one week from the scheduled exam is allowed.
- Assignments - The extension will correlate to the number of days stated in the medical certificate from the doctor. A maximum extension of up to one week from the original assignment submission date is allowed.

### DEFERRALS

A deferral may be granted to allow the student to re-enrol in the subject when it is next available or when they are fit to study within a maximum of 12 months

- The deferred subject will appear on the student's transcript as deferred until the re-enrolment into the next available study period (or within a maximum of 12 months) has been processed
- If the student fails to re-enrol within 12 months of the deferred subject, the deferred subject will appear on the student's transcript as Absent Fail.
- Results from a previous assessment event for a deferred subject may be carried over to the next enrolments if no changes are made to the assessment strategy.
- If assessment has not been attempted at the mid study assessment period a deferral cannot be applied for the end of the study period. If a student is not able to complete the subject a re-enrolment into the subject will be required.

### PERFORMANCE AFFECTED

If a student has sat an exam or submitted an assignment and feel their performance was affected by illness, misadventure or adverse personal circumstances on the assessment date which was beyond their control they may apply for performance affected. If approved, the overall assessment mark will be adjusted by a maximum of two (2) marks if it changes the student's grade at the overall level

No action will be taken and mark originally awarded will remain unchanged if the matter is deemed to not have affected to the student's performance in the assessment.

### REASONABLE ADJUSTMENT

Students with documented learning needs prior to their enrolments may be eligible for additional support. Students should contact a Student Experience Advisor on 1300 135 798 for further information.

Students who wish to appeal the outcome of their special consideration application should refer to the student grievance policy [www.kaplanprofessional.edu.au](http://www.kaplanprofessional.edu.au)

## Special Consideration Application Form

### APPENDIX 1: Special Consideration Application

PLEASE TYPE IN YOUR DETAILS WHEN COMPLETING THIS FORM AND KEEP A COPY

Personal Information			
Student ID			
Name:			
Address:			
E-mail:			
Phone (Work):		Phone (Mobile):	
Course:			
Subject:			
Study Period:			
Please detail below the circumstances which have affected your studies during this study period:			
Please indicate below your desired outcome:			
<input type="checkbox"/> Assessment Extension (original due date) <input type="checkbox"/> Deferral <input type="checkbox"/> Performance Affected ( assessment date) <input type="checkbox"/> Paper- based exam <input type="checkbox"/> Online Exam			
Student Declaration			
I have read and understood the policy guidelines on this application and I also understand that the submission of an application for a Special Condition does not automatically mean it will be approved. I give Kaplan the permission to contact medical practitioners or other relevant parties to verify authenticity of the supporting documentation I have provided in my application.			
Signed (Student) :		Date:	

**email to** studentadviser@kaplan.edu.au

**mail to** Kaplan Professional, Special Consideration Application, Level 4, 45 Clarence Street, Sydney, NSW 2000

**Application Assistance** Contact your Student Experience Adviser or call 1300 135 798 (+612 8248 7611).

## Special Consideration Application Form

### APPENDIX 2: Medical Documentation

PLEASE TYPE IN YOUR DETAILS WHEN COMPLETING THIS FORM AND KEEP A COPY

- This form must be completed in its entirety by registered medical practitioner or counsellor
- The registered medical practitioner or counsellor must not be related to the student
- Completion of this form must be legible with specific details

Personal Information		
<b>Student's name:</b>		
<b>Date/s of consultation:</b>		
Duration		
Please indicate your evaluation of the severity, duration and effect on the student's ability to attend examinations/submit assignments by the required Kaplan time frames:		
Severity of Condition ( Please tick as appropriate)		
	<b>From</b>	<b>To</b>
<input type="checkbox"/> Totally unable to study/complete work		
<input type="checkbox"/> Able to complete work with very severe impairment		
<input type="checkbox"/> Able to complete work with very moderate impairment		
<input type="checkbox"/> Unable to assess		

Plan English descriptions of: Nature of illness, symptoms, restrictions on student's capacity to prepare for/attend exams or submit assignments.

Attach relevant documentation (bearing in mind privacy requirements)			
I authorise Kaplan to contact me or my office to confirm authenticity of this document.			
Doctor/Counsellor Name:			
Practice Name:			
Address			
Phone number:		Provider Number:	
Your official stamp here			
Signature:		Date:	

**email to** [studentadviser@kaplan.edu.au](mailto:studentadviser@kaplan.edu.au)

**mail to** Kaplan Professional, Special Consideration Application, Level 4, 45 Clarence Street, Sydney, NSW 2000

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