

CFS09: Submission of Documentation Form

Use this form to submit documents for compassionate or compelling circumstances and other submissions.

Student Name:			
Student ID Number:			
Course Enrolled:			
Class Number:			
Nature of documents submitted:			
1. Serious illness or injury (i.e. Medical Certificate)			<input type="checkbox"/>
a) Medical Certificate to cover your normal class			<input type="checkbox"/>
b) Medical certificate to cover your re-do class [Unit Name: _____]			<input type="checkbox"/>
c) As appeal documents against a warning letter for poor attendance			<input type="checkbox"/>
2. A Statutory Declaration / Statement in support of class absence(s)			<input type="checkbox"/>
3. Bereavement of immediate family members (Certificate required)			<input type="checkbox"/>
4. Working with Children Check			<input type="checkbox"/>
5. National Police Clearance			<input type="checkbox"/>
6. Immunization records			<input type="checkbox"/>
7. First Aid certificate			<input type="checkbox"/>
8. Flight itinerary			<input type="checkbox"/>
9. Other documentation [Please specify _____]			<input type="checkbox"/>
Signature		Date	

This form should be used only along with supporting documents (such as a Medical Certificate)

Please note that Medical certificates submitted later than 2 weeks will NOT be accepted.

OFFICE USE ONLY			
Received By:		Date Received:	
Medical Certificate was handed within two weeks	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Documents Recorded in PowerPro/Attendance:		Date Recorded:	
Recorded By:		Signature:	