



**Broken Hill High School
Years 7- 10 Illness/Misadventure Form**

To be completed when an assessment task is missed.

Student Name: Year: Class:.....

Date of task/absence:

Task:

Reason for absence/Supporting evidence: (attach any supporting documentation)
.....
.....
.....

Parental Signature: Student Signature:.....

Decision/outcome:
..... Head Teacher Signature.....



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