

APPENDIX 2 - Missed Assessment Opportunity Form

MISSED ASSESSMENT OPPORTUNITY

TO BE COMPLETED AND HANDED IN AT LEAST ONE FULL DAY BEFORE DUE DATE OR ON DAY OF ASSESSMENT IF ABSENCE NOT FORESEEABLE. *To be filled in prior to a known absence e.g sports trip, cultural trip, medical appointment etc*

STUDENT NAME: _____ Class: _____

SUBJECT: _____ TEACHER: _____

ASSESSMENT: _____

DATE OF MISSED ASSESSMENT: _____

REASON FOR MISSED ASSESSMENT:



Supporting documentation/evidence attached

SIGNED: _____ (student) DATE: _____

REASON FOR MISSED ASSESSMENT – ACCEPTABLE?

REASON: _____

SIGNED: _____ (Subject Teacher) DATE: _____

SIGNED: _____ (AP or Learning Area Liaison) DATE: _____

SIGNED: _____ (NZQA PN) DATE: _____

**THIS FORM MUST BE STORED BY THE PN AND BE AVAILABLE FOR AUDIT.
File with the students Assessment work**