Please indicate that you have met the following criteria and demonstrated this in your application:

1. I have attached evidence from a Registered Professional Authority (e.g. Medical Practitioner or Counsellor) including a Professional Practitioner Certificate verifying (a) the impact of the adverse circumstances on my ability to study and (b) the duration of the circumstances.
2. The documentation demonstrates that the adverse circumstances significantly deteriorated since, or occurred after, the seventh week of semester.
3. I have sought special consideration for the unit(s) of study for which I am requesting a DNF grade, or I have demonstrated that I was unable, for reasons beyond my control, to go through the Faculty’s established procedures for special consideration. (Note that DNF grades are not normally granted if a student has attempted and failed assessment.)

Applications are to be submitted as soon as possible once supporting documentation has been sought from a Registered Professional Authority. No applications will be accepted two weeks after the end of the teaching period unless special consideration was sought for end of semester assessment, or evidence is provided to support a late application and exceptional circumstances apply. The outcome will be sent via university email two weeks from the receipt of an application.

**Student's consent**

I understand that my application for DNF requires supporting documentation from a Registered Professional Authority. I am aware that the registered professional may be contacted to verify my application. I acknowledge that disciplinary action may be taken if I supply false or misleading information.

Signature: ___________________________ Date: ___________________
I. Rationale and principles

This policy must be read in conjunction with the Academic Board Resolutions: Assessment and Examination of Coursework (2000 & as amended).

The determination that a DNF result is warranted after the end of the seventh week of semester allows for students seriously affected by illness or misadventure not to be disadvantaged due to circumstances beyond their control. A DNF result under these circumstances should be considered together with all special consideration methods as an available option for affected students.

The definition of and circumstances allowing for the grade of Discontinue Not Fail (DNF) after the seventh week of semester are outlined in the Academic Board Resolutions: Assessment and Examination of Coursework (2000, & as amended), specifically part five (Special Consideration due to Serious Illness, Injury and Misadventure). The formulation of Special Consideration policy as a result of these resolutions is considered elsewhere, but as the Resolutions directly link special consideration with the determination of a late DNF, the principles apply similarly.

The Faculty will only consider the determination of a DNF grade based on illness, injury or misadventure where no other option but to discontinue is deemed possible, that is, where special consideration in relation to individual assessment instruments has been exhausted or is otherwise inapplicable (Part 5.4.1)

Any replacement assessment determined on the grounds of special consideration should be completed no later than six weeks after the date of the final examination in a unit of study. Where this is not possible due to the further documented illness or misadventure of the student and an alternative valid means of assessment cannot be determined, a grade of DNF should be awarded (Part 5.6.1.6)

A DNF result applied late and due to personal circumstances should always be considered exceptional and a last resort where other methods of special consideration may not or cannot be applied. The circumstances must therefore be exceptional, long term, documented and unknown or unforeseeable at the point of on time variation without penalty (the end of week seven in a standard semester).

II. Conditions for approval

An application to record a DNF due to illness or misadventure will normally only be considered under the following circumstances, where:

1. Exceptional circumstances exist
2. Other methods of special consideration are unavailable or have been exhausted
3. Circumstances are independently verified and have either not been known at, or have significantly deteriorated after, the seventh week of semester
4. The applicant has not attempted and failed assessment tasks in the unit/s of study for which the DNF is sought
5. Unless subject to replacement assessment through special consideration the application is normally made within two (2) weeks of the conclusion of the teaching period for the semester in which a DNF is sought. Students must not wait until the release of results to apply.

III. Supporting documentation

All applications must be independently verified, personal statements or statutory declarations are insufficient when applying for a late DNF. Exceptional circumstances can be either medical or personal in nature but the application form must be accompanied by a statement from the student’s doctor, counselor or independent member of the community and must indicate:

- The date the student’s condition began or changed
- If the student’s circumstances changed after the census date, the date they changed and to what extent
- How the condition affected the student’s ability to study
- When it became apparent that the student could not continue studying

SECTION B: FACULTY USE ONLY

- Provided evidence from a registered medical practitioner or counsellor including a Professional Practitioner Certificate verifying (a) the impact of the adverse circumstances on student’s ability to study and (b) the duration of the circumstances.
- Demonstrated adverse circumstances before the seventh week of semester or the circumstances significantly deteriorated since the seventh week of semester.
- Sought special consideration for the unit(s) of study or
- Unable, for reasons beyond student’s control, to go through the Faculty’s established procedures for special consideration.
- Application submitted on time.

Application Approved  Application Declined

Reason for decision:

___________________________________________________________________________________________________________
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

Position: ______________________________  Signed:  ______________________________  Date: ____________________