


# SAMPLE OF THE SPECIAL CONSIDERATION APPLICATION FORM

\*\*\*The information is for your reference only. You should complete the application form with your own personal information. The application form must be submitted to VN Assessment Support in **its original full format** (PDF format and 5 pages including the blank page/s) and as **attachment to the email**, not via Microsoft SharePoint or OneDrive link \*\*\*

## PAGE 1

Application for special consideration (Vietnam campus)



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**Section A – Personal details**

RMIT student number  Date of birth (DD/MM/YYYY)   
 Full name  Contact tel. number   
 Program code  Program name   
 School

Academic career (please tick one):  Preparatory  Vocational Education  Undergraduate  Postgraduate  Research  
 Are you an international onshore student? (please tick one)  Yes  No

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**Section B – Important information**

**Eligibility**  
 Students may apply for special consideration on a range of medical or non-medical grounds where they experience unexpected circumstances outside their control which:

- prevent them from submitting assessable task/s or
- prevent them from attending an assessment task/s or
- substantially affect their performance in the above.

The special consideration process is not intended for long-term physical or mental health conditions or disabilities.  
 The application must clearly demonstrate that it meets the eligibility criteria as identified in the Assessment and Assessment Flexibility Policy and the Assessment Processes at [policies.rmit.edu.au](https://policies.rmit.edu.au). The granting of special consideration is not automatic but is decided on the basis of your application and the evidence supplied.  
 This process does **not** apply to:

- students seeking an extension of seven calendar days or less from the original submission due date to submit assessment tasks.  
 A separate *Application for extension of time to submit assessment work form* (available from [rmit.edu.vn/students/my-studies/assessment-and-results/extensions-and-special-consideration/extensions](https://rmit.edu.vn/students/my-studies/assessment-and-results/extensions-and-special-consideration/extensions)) must be completed. These applications must be submitted to the school that offers the course no later than one working day before the assessment deadline.
- research students' thesis courses. Higher degree by research students should contact their supervisor to discuss support.

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**Section C – Instructions**

**Lodgement options**

Applications must be submitted no later than five working days after the date/due date of the assessment for which you are seeking special consideration.

If you are unable to obtain your supporting documentation by this deadline you must still submit your application but include a statement advising that your supporting documentation will follow. You have a maximum of five working days from the date the application was submitted to provide your supporting documentation.

An application may be submitted:

- via **Student Connect portal**
- via email to [assessment.support@rmit.edu.vn](mailto:assessment.support@rmit.edu.vn).

Please retain a copy of your application and supporting documentation.

Applicants for adjustments to study and assessment conditions must contact Equitable Learning Services (see [rmit.edu.vn/students/support/wellbeing-support/equitable-learning-and-accessibility](https://rmit.edu.vn/students/support/wellbeing-support/equitable-learning-and-accessibility)) to be assessed for eligibility for an Equitable Learning Plan.

**More information**  
[rmit.edu.vn/students/my-studies/assessment-and-results/extensions-and-special-consideration/special-consideration](https://rmit.edu.vn/students/my-studies/assessment-and-results/extensions-and-special-consideration/special-consideration)

**Completing this form**

When using this form, please ensure you complete the following:

- Provide complete details for each assessment in a course for which you seek special consideration (Section D).
- Provide a detailed statement of your grounds for special consideration (Section G).  
**Supporting documentation** – Your application must be accompanied by independent substantiating documentation written in English or accompanied by an accredited translation. If you are applying on medical/psychological grounds, we recommend that the Impact assessment statement section of this form (page 4) is completed by an independent, qualified practitioner who is treating you.
- Sign and date the student declaration (Section H).

Your notification of application outcome will be sent within 10 working days to your RMIT student email account. It is your responsibility to check that account regularly and ensure it is able to receive mail.

Extensions of more than seven calendar days from the original due date for submittable work (e.g. assignments, projects, etc.): It is expected that you will continue to progress that work and submit it as soon as possible while your application is under consideration.  
**Late applications** will only be considered if compelling or compassionate reasons are evidenced. Such applications must contain a detailed explanation of the reasons for being late, supported by documentary evidence of these reasons.

Complete **SECTION A** with your personal details and tick the relevant boxes

You're highly suggested to carefully read through **SECTION B** and **SECTION C**

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RMIT student number S1234567

Section D – Courses for which a special consideration is sought

COURSE 1

Course code	Catalogue number	Course title
M K T G	1 4 1 9	SOCIAL MEDIA AND MOBILE MARKETING

For example

M	A	T	H	1	2	3	4	C	Introduction to Mathematics
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Assessment type

- Assignment – proposed new submission date: (DD/MM/YYYY) 06/09/2022
- Lab/practical assessment
- Lab/practical report – proposed new submission date: (DD/MM/YYYY)
- Online assessment – date (DD/MM/YYYY) and time (H:H:MM): from to
- Oral assessment
- Other (please specify)
- Placement/WIL
- Presentation
- Test

Date/due date of assessment (DD/MM/YYYY) 28/08/2022

Weight of assessment (%) 40  
I.e. how much does this assessment count towards your overall grade for this course.

Did you submit/complete the assessment on the due date?  Yes  No

Have you previously been granted an extension/special consideration for this assessment?  Yes  No

Is the work currently in progress?  Yes  No

What was the assessment?  Individual  Group work

I am seeking late course withdrawal without academic penalty  
Please note:

- You need to have a final non-passing grade published for the course you wish to seek late course withdrawal without academic penalty from.
- Where no final non-passing grade is published, your application may take longer to process.

COURSE 2

Course code	Catalogue number	Course title
M K T G	1 4 1 9	SOCIAL MEDIA AND MOBILE MARKETING

For example

M	A	T	H	1	2	3	4	C	Introduction to Mathematics
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Assessment type

- Assignment – proposed new submission date: (DD/MM/YYYY)
- Lab/practical assessment
- Lab/practical report – proposed new submission date: (DD/MM/YYYY)
- Online assessment – date (DD/MM/YYYY) and time (H:H:MM): from to
- Oral assessment
- Other (please specify)
- Placement/WIL
- Presentation
- Test

Date/due date of assessment (DD/MM/YYYY) 29/08/2022

Weight of assessment (%) 20  
I.e. how much does this assessment count towards your overall grade for this course.

Did you submit/complete the assessment on the due date?  Yes  No

Have you previously been granted an extension/special consideration for this assessment?  Yes  No

Is the work currently in progress?  Yes  No

What was the assessment?  Individual  Group work


I am seeking late course withdrawal without academic penalty  
Please note:

- You need to have a final non-passing grade published for the course you wish to seek late course withdrawal without academic penalty from.
- Where no final non-passing grade is published, your application may take longer to process.

Don't forget your student number!

Fill in the details of EACH assessment in 1 COURSE section only. Do not input MANY assessments in 1 COURSE section

If you already submitted your assessment on the original DUE DATE, tick YES

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**Section D – Courses for which a special consideration is sought continued...**

**COURSE 3**

Course code	Catalogue number	Course title
E C O N 1 1 9 3		BUSINESS STATISTICS 1

For example  
M A T H 1 2 3 4 C Introduction to Mathematics

Assessment type  
 Assignment – proposed new submission date: (DD/MM/YYYY)   
 Lab/practical assessment  
 Lab/practical report – proposed new submission date: (DD/MM/YYYY)   
 Online assessment – date (DD/MM/YYYY) and time (H:H:MM): from  to   
 Oral assessment  
 Other (please specify)   
 Placement/WIL  
 Presentation  
 Test

Date/due date of assessment (DD/MM/YYYY)   
 Weight of assessment (%)   
 I.e. how much does this assessment count towards your overall grade for this course.  
 Did you submit/complete the assessment on the due date?  Yes  No  
 Have you previously been granted an extension/special consideration for this assessment?  Yes  No  
 Is the work currently in progress?  Yes  No  
 What was the assessment?  Individual  Group work  
 I am seeking late course withdrawal without academic penalty  
 Please note:  
 • You need to have a final non-passing grade published for the course you wish to seek late course withdrawal without academic penalty from.  
 • Where no final non-passing grade is published, your application may take longer to process.

**COURSE 4**

Course code	Catalogue number	Course title
B U S M 4 1 8 5		INTRODUCTION TO MANAGEMENT

For example  
M A T H 1 2 3 4 C Introduction to Mathematics

Assessment type  
 Assignment – proposed new submission date: (DD/MM/YYYY)   
 Lab/practical assessment  
 Lab/practical report – proposed new submission date: (DD/MM/YYYY)   
 Online assessment – date (DD/MM/YYYY) and time (H:H:MM): from  to   
 Oral assessment  
 Other (please specify)   
 Placement/WIL  
 Presentation  
 Test

Date/due date of assessment (DD/MM/YYYY)   
 Weight of assessment (%)   
 I.e. how much does this assessment count towards your overall grade for this course.  
 Did you submit/complete the assessment on the due date?  Yes  No  
 Have you previously been granted an extension/special consideration for this assessment?  Yes  No  
 Is the work currently in progress?  Yes  No  
 What was the assessment?  Individual  Group work  
 I am seeking late course withdrawal without academic penalty  
 Please note:  
 • You need to have a final non-passing grade published for the course you wish to seek late course withdrawal without academic penalty from.  
 • Where no final non-passing grade is published, your application may take longer to process.

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**Don't forget your student number!**

**If you want to request Special Consideration for the assessments of other courses, you can put them all in ONE application form \*\*\***

**If you have been granted with an approved Special Consideration from VN Assessment Support, tick YES**

**Complete this area ONLY when you want to withdraw from the course without academic penalty**

**\*\*\*NOTE:** If there are more than 04 (four) assessments for special consideration at a time, you're suggested to submit other special consideration application form/s.



### Application for special consideration (Vietnam campus)

RMIT student number S1234567

**Section E – Impact assessment statement – for a special consideration application on health/medical grounds**

Please note: This impact assessment statement (IAS) is the best way to establish medical/health grounds for a special consideration application. A standard medical certificate can also be accepted if it states the dates and nature of the impact. If difficult personal circumstances are impacting your health, wellbeing and studies and you're unable to provide other supporting evidence, you may provide a completed IAS. This IAS must be completed by the registered medical/health practitioner who treated you for the condition (or supported you with your difficult circumstances). You may also include other documentation such as a letter from the practitioner. I agree to RMIT University contacting my medical/health practitioner as necessary to clarify the information provided below.

Student signature \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

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**Section F – Medical/health practitioner assessment**

On (date/s of consultation) \_\_\_\_\_

I (name), \_\_\_\_\_ a registered medical/health practitioner, examined

Student name \_\_\_\_\_ Student number \_\_\_\_\_

and  have determined that they are suffering from \_\_\_\_\_ (condition to be stated with student's consent)

or  the student reports that they are suffering from \_\_\_\_\_

From date (DD/MM/YYYY) \_\_\_\_\_ to date (DD/MM/YYYY) \_\_\_\_\_

The condition is  permanent  infectious  episodic/fluctuating  deteriorating  improving

**Please indicate your professional assessment of the type and level of impact of the condition on the student's activities.**

Description of impact of the medical/health condition	Additional information	Dates affected	From (DD/MM/YYYY)	To (DD/MM/YYYY)
1. Able to travel/attend <input type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> as determined above <input type="checkbox"/> dates within the following		
2. Able to do sustained reading, note-taking and writing <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, able to work <input type="checkbox"/> as usual <input type="checkbox"/> moderately less than usual <input type="checkbox"/> significantly less than usual	<input type="checkbox"/> as determined above <input type="checkbox"/> dates within the following		
3. Able to perform a task requiring intense concentration for 1–2 hours <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, able to complete <input type="checkbox"/> as usual <input type="checkbox"/> significantly less than usual	<input type="checkbox"/> as determined above <input type="checkbox"/> dates within the following		

Additional information (complete as needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Practitioner's signature \_\_\_\_\_ Date (DD/MM/YYYY) \_\_\_\_\_

Hospital/Clinic's stamp

Complete only for details not provided in the stamp

Practitioner registration number \_\_\_\_\_

Address of practice \_\_\_\_\_

Tel. \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Don't forget your student number!

Insert your signature/ name and the date you have the Impact Assessment Statement completed

\*\*\*IMPORTANT\*\*\*

SECTION F – Medical/ health practitioner assessment **MUST BE completed by your DOCTOR/ HEALTH PRACTITIONER**, and not by **YOURSELF**. The doctor/ health practitioner's signature, name stamp and the hospital/ clinic's red stamp are also required.



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RMIT UNIVERSITY

RMIT student number

**Section G – Grounds of your application**

A detailed statement of the grounds for your application **must** be provided below and/or attached. Independent supporting documentation/ evidence of the situation and the impact of this circumstance on your ability to study or undertake the required assessment/s **must** be attached.

WRITE YOUR GROUNDS OF SPECIAL CONSIDERATION HERE IN DETAIL: MEDICAL OR NON-MEDICAL

**Section H – Student declaration**

I currently have an Equitable Learning Plan (ELP) in place with Equitable Learning Services:  Yes  No

I have previously been granted a school approved extension for this assessment:  Yes  No

Documentary evidence in support of my special consideration application:  is attached or  will follow

\* Documentary evidence must be submitted within five working days of your application.

I have read and understood the information provided in this application.

I declare the information provided by me is true and correct in every detail. I acknowledge that RMIT University reserves the right to confirm the information provided and may vary or reverse any decision regarding special consideration on the basis of incorrect or incomplete information.

I understand that it is my responsibility to establish sufficient grounds for special consideration and to provide the evidence to support these grounds.

I understand that incomplete and unsupported applications cannot be considered by the University and that provision of false or misleading information is grounds for disciplinary action.

I give consent for the University to contact my treating practitioner and/or other person or organisation named in supporting documentation to confirm/clarify the information provided and for the practitioner or other person/organisation to provide information limited to its impact on my ability to complete the assessment tasks described in my application for special consideration.

I also give consent for my supporting documentation to be referenced in any remissions process that I may initiate.

I understand I may be asked to provide a more specific consent to disclosure of the information should this be required by the University.

I understand that I must monitor my RMIT student email account daily regarding this special consideration application, and that my student email inbox must be able to receive incoming email, i.e. maximum storage limits have not been reached.

Student signature  Date (DD/MM/YYYY)

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**Don't forget your student number!**

**Input a detailed statement of the grounds for your application (the reason why you're applying for special consideration)**

**Tick YES if you currently have an ELP. Otherwise, tick NO**

**Tick YES if you've been granted an approved extension from your lecturer/ course coordinator. Then attach the approval email to your application. Otherwise, tick NO.**

**Tick IS ATTACHED if you have the documentary evidence available, then attach it/ them to your application. Otherwise, tick WILL FOLLOW and the documentary evidence must be submitted within 5 working days from the day you lodge your application form.**

**\*\*\*NOTE: DO NOT COMBINE the documentary evidence with the application form in ONE pdf file.**

**Tick all the relevant boxes. Otherwise the application form will not be considered COMPLETE**

**Insert your signature/ name and the date you complete the application form**