

# Application for Special Consideration

Please complete form in BLOCK LETTERS.

Special consideration is a set of circumstances which disadvantages a student's study program to a serious extent, and results in an inability to sit a scheduled examination or complete an assignment. Special consideration covers, but is not limited to:

- serious medical condition or injury
- bereavement or illness of a family member
- personal reasons of an ongoing or sudden nature that severely impacts mental health
- other exceptional circumstances beyond your control

However special consideration cannot cover misreading the examination timetable or work commitments.

Special consideration does not allow for moderating an exam to a competent result; each exam must be marked based on the answers submitted.

If special consideration is granted after a student has attempted an assessment and received a not yet competent result, the assessment does need to be attempted again. The student may receive a reduction in the re-enrolment fee (which is typically paid to cover the administrative cost of re-enrolling the student in the unit again, access to the study material and the assessments).

Applications need to be made no later than 5 business days after the assessment due date. All applications must be accompanied by the appropriate evidence.

All decisions will be advised by email within three (3) business days.

## I wish to be considered for special consideration for the following reason

Please select only one

- ☐ Medical (attach medical certificate) ☐ Personal (attach supporting evidence e.g. letter from manager)

**Note: Only application with official supporting documentation will be reviewed. All valid applications will be reviewed on a case-by-case basis and an outcome will be advised to the sender within 3 business days.**

Please give details (optional)

Documents in a language other than English must be accompanied by a certified translation. In Australia, a certified copy is one certified by a Justice of the Peace or a Commissioner for Declarations or a person before whom a Statutory Declaration may be made under the Statutory Declarations Act 1959. If the copy is to be certified in a place outside Australia it should be certified by a person who is the equivalent of a Justice of the Peace or Commissioner for Declarations in that place, eg. A Notary Public.

## Personal Details

Your Master ID (if you do not know your Master ID please find it at [www.anziif.com](http://www.anziif.com))

Given Name

Middle Name

Family Name

Business Phone

( )

Home Phone or Mobile

( )

Preferred Email

## I wish to be considered for special consideration for the following ANZIIF Units

Unit Name

Unit Code (eg. GE20002-20)

Please transfer me to study period (eg. SSF2501):

Unit Name

Unit Code (eg. GE20002-20)

Please transfer me to study period (eg. SF2501):

## Privacy Statement

ANZIIF stores your personal information for the purposes of providing education and membership services, improving and promoting its products and services, and meeting education regulatory reporting and compliance requirements. To review ANZIIF's full privacy policy go to [www.anziif.com/privacy](http://www.anziif.com/privacy).

Many employers support their staff in their studies and are keen to know their progress. ANZIIF on occasions is asked to supply student results to employers. Please indicate if you do not wish to have your results released to your employer for this enrolment by emailing [customerservice@anziif.com](mailto:customerservice@anziif.com), quoting your Master ID, the name of the module and advising that you do not agree to ANZIIF releasing your results to your employer.

## Declaration

I declare that to the best of my knowledge the information supplied in this enrolment is correct and complete. I acknowledge that the provision of incorrect information or documentation relating to my enrolment may result in withdrawal of any offer of a place and that such withdrawal may take effect at any stage of the course, at the discretion of the Institute. I agree to abide by the Statutes, Rules and Regulations of ANZIIF.

Signature

Date

Please return this completed enrolment form with correct enrolment fee to the **Australian and New Zealand Institute of Insurance and Finance**.

Mail to:

Suite 2, Level 2, 50 Lonsdale Street  
Melbourne VIC 3000  
Australia

Email:

[studentsupport@anziif.com](mailto:studentsupport@anziif.com)