



FHS033 - APPLICATION FOR A CONCESSION TO MISS CLASSES / ACADEMIC ACTIVITIES (FACULTY OF HEALTH SCIENCES - POSTGRADUATE STUDENTS)

Note:

- This form is intended for an application of no longer than 10 consecutive academic days.
- [Section A](#) must be completed by the student who must submit the signed form together with the documentary evidence to the Course Convener/s as soon as possible.
- [Section B](#) must be completed by impacted Course Convener/s. The Course Convener (or Course Administrator) should scan and send the completed, signed form and documentary evidence to the relevant Supervisor and Programme Convener.
- [Section C](#) must be completed by the Supervisor, Programme Convener and the Head of Department/Division.
- [Principles](#) governing this process must noted and adhered to. For full principles and SOP/process, see: [FHS033hlp.pdf](#)

SECTION A: TO BE COMPLETED BY STUDENT (Please print clearly)

PERSONAL AND CONTACT INFORMATION

Student Name/s:		Surname	
Student Campus ID:			
Student contact details:	Landline/mobile number		Email
Emergency contact details:	Name	Phone	Email
Contact address while away from class/academic activities:			

DEGREE AND COURSE DETAILS

Degree:		Academic year of study (AYOS):	
Course code:		Course title:	

Previous periods of absence in current year

State other period/s of absence **taken** in the current academic year (dd/mm/yyyy to dd/mm/yyyy):

From (dd/mm/yyyy)		To (dd/mm/yyyy)	
From (dd/mm/yyyy)		To (dd/mm/yyyy)	

CURRENT APPLICATION FOR ABSENCE

Period of absence **requested** in current application (dd/mm/yyyy to dd/mm/yyyy):

From (dd/mm/yyyy)		To (dd/mm/yyyy)	
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Reason/s for current application:

IF APPLICABLE, state which DP requirement/s cannot be met? (Quote the course manual or Faculty handbook):



ADDITIONAL SUPPORTING DOCUMENTS AND/OR INFORMATION

Please attach and or include the following information in support of your application:



(a) List below the document/s you are enclosing in support of your application; and

b) Attach all documentary evidence (e.g. A medical certificate / a death certificate if a family member has passed away).

c) Please list names and email addresses of course conveners from whom you are requesting a concession

Course Convener

Email Address

Date (dd/mm/yyyy):

Signature of student:



SECTION B: TO BE COMPLETED BY COURSE CONVENER/S (Please print clearly)

Note: This section must be **completed by the course convener for each course affected** by the students' missed attendance.

B1. COURSE CONVENER 1

Course code		Course title:	
It is recommended that the concession be:	APPROVED	<input type="checkbox"/>	NOT APPROVED <input type="checkbox"/>
Date of approval (dd/mm/yyyy):			
Name of convener (print):		Signature:	
If approved, LIST CONDITIONS (e.g. how time or missed work must be made up):			
The above conditions have been discussed with the student (Yes/No)	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If NOT approved, please provide reason/s for not approving:			

B2. COURSE CONVENER 2

Course code		Course title:	
It is recommended that the concession be:	APPROVED	<input type="checkbox"/>	NOT APPROVED <input type="checkbox"/>
Date of approval (dd/mm/yyyy):			
Name of convener (print):		Signature:	
If approved, LIST CONDITIONS (e.g. how time or missed work must be made up):			
The above conditions have been discussed with the student (Yes/No)	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If NOT approved, please provide reason/s for not approving:			



B3. COURSE CONVENER 3

Course code		Course title:	
It is recommended that the concession be:		APPROVED <input type="checkbox"/>	NOT APPROVED <input type="checkbox"/>
Date of approval (dd/mm/yyyy):			
Name of convener (print):		Signature:	
If approved, LIST CONDITIONS (e.g. how time or missed work must be made up):			
The above conditions have been discussed with the student (Yes/No)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If NOT approved, please provide reason/s for not approving:			

Note: The course convener (or course administrator) should scan and send the completed, signed form and any documentary evidence to the relevant Supervisor and Programme Convener.



**SECTION C: TO BE COMPLETED BY SUPERVISOR, PROGRAMME CONVENER and HOD
(Please print clearly)**

Note: If necessary, the Supervisor/ Programme Convener should revert to Course Convener/s to discuss

**C1. SUPERVISOR RECOMMENDATION
(based on sections completed by Course convener/s above)**

It is recommended that the concession be:		APPROVED	<input type="checkbox"/>	NOT APPROVED	<input type="checkbox"/>
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Supervisor	Name (print):	Signature:	Date (dd/mm/yyyy):
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If approved, LIST CONDITIONS (e.g. how time or missed work must be made up):

The above conditions have been discussed with the student (Yes/No)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If **NOT** approved, please provide reason/s for not approving:

Note: Supervisor (or relevant Administrator) to scan and send completed, signed form and documentary evidence for final signature to Head of Division or Head of Department.

**C2. PROGRAMME CONVENER RECOMMENDATION
(based on sections completed by Course convener/s and Supervisor above)**

It is recommended that the concession be:		APPROVED	<input type="checkbox"/>	NOT APPROVED	<input type="checkbox"/>
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Programme Convener:	Name (print):	Signature:	Date (dd/mm/yyyy):
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If approved, LIST CONDITIONS (e.g. how time or missed work must be made up):

The above conditions have been discussed with the student (Yes/No)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If **NOT** approved, please provide reason/s for not approving:

Note: Programme Convener (or relevant Administrator) to scan and send completed, signed form and documentary evidence for final signature to Head of Department.



C3. FINAL DECISION

The concession is:		APPROVED		<input type="checkbox"/>	NOT APPROVED		<input type="checkbox"/>
Head of Division / Head of Department	Name (print):	Signature:		Date (dd/mm/yyyy):			
If approved, LIST CONDITIONS (e.g. how time or missed work must be made up):							
The above conditions have been discussed with the student (Yes/No)				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If NOT approved, please provide reason/s for not approving:							

Note:

- The relevant Administrator should scan and send the completed, signed form and any documentary evidence to the student and Nonkosi Malala (nonkosi.malala@uct.ac.za) in the Student Development and Support Office in the Faculty Office.
- See [page 7](#) for principles applicable to this process.

PRINCIPLES: CONCESSION TO MISS CLASSES / ACADEMIC ACTIVITIES

1. Concession to miss classes / academic activities (usually for period not exceeding 10 consecutive academic days) may be granted for medical, compassionate or other approved reasons on application to the course convenors.
2. There are two categories of concession to miss classes / academic activities:
 1. Cases where missed work can be made up, by arrangement between the convenor and the student; and
 2. Cases where missed work cannot be made up, and when the student will be required to repeat the course.
3. The student is required to obtain approval from the course convenor/s during whose courses the absence will take place. The student must obtain an application form for a concession to miss classes / academic activities from the Administrator in the relevant academic Department from which the student wishes to obtain permission to miss classes / academic activities, with supporting documentary evidence.
4. The student must complete section A, obtain signature/s from course convenor/s for section B of the application form and submit with the supporting documentation to the Departmental Administrator in the relevant Department from which the student wishes to obtain a concession. The Departmental Administrator will obtain recommendations from the supervisor, programme convener and Head of Department or Head of Division for final approval.
5. If the student is unable to complete section A of this form, due to ill health/ absence, the Course/Departmental Administrator will obtain recommendations from the individual Course Conveners, Supervisor and relevant Programme Convener and submit to the Head of Department/Division for final approval.
6. The Administrator will inform the student of the outcome in an email.
7. The relevant Administrator will send copies of all signed-off application forms to the Student Development and Support Administrator in the Faculty Office (Ms Nonkosi Malala), who will track the reasons to miss classes / academic activities for support action and for the record.
8. In the case of a very short absence, such as a portion of a day, or any other exceptional circumstances of brief duration, an explanatory letter by the student may be accepted as supporting document.

For enquiries please contact:

Ms Nonkosi Malala
Undergraduate Academic Administration Office
Room N2.17, Wernher and Beit North
UCT Faculty of Health Sciences
Email: nonkosi.malala@uct.ac.za
Tel: 021 4066 749

Note:

- Please ensure that all relevant Course Conveners have completed and signed Section B
- The student has to liaise with the Administrator to ensure that relevant signatories have completed and sign.
- Departmental Administrators to submit the application to relevant Supervisor/ Programme Convener for approval and to ensure that final approval is obtained, and the relevant signatories have signed Section C
- Programme Administrators to ensure that final signed forms and supporting documents are sent to the Student Support Administrator in the Faculty Office.
- DP requirements specific to each course may apply. In applying for a concession to miss classes / academic activities, the student should ensure that this application does not place her/ him at risk of not meeting the attendance requirements. If the DP requirements are at risk, the stipulations and conditions needed to meet the missed DP classes and/or activities must be fulfilled before the student is eligible to do the course examination.
- This application is to miss classes / academic activities. It is not an application to miss/defer assessments or examinations. Please contact relevant Departments (s) for scheduling assessments or deferred examination processes.