

Application for Supplementary Assessment (Last to Complete) in Final Unit of Study



WHEN IS THIS APPLICATION DUE?

You must submit this application no later than midday on the fifth working day after exam results are published in your final teaching period.

WHEN SHOULD YOU USE THIS FORM?

Last to Complete is available to students who have obtained a pass result in all units of study for their award except one. These applications should be submitted to Student Central no more than five (5) business days after the release of results and cannot be submitted until all results are published in your final teaching period.










To be eligible for Supplementary Assessment (Last to Complete) you must meet the following criteria:

- Have obtained a pass result in all units of study for your award except one, and have made a genuine attempt, presented for and failed that unit of study in the final teaching period; or penultimate teaching period if the unit is required to complete the course and is not offered in your final teaching period.
- A genuine attempt must include fulfilment of all assessment requirements as specified in the unit outline for the unit of study and the achievement of an overall mark of 40% - 49%.
- You may only apply for Supplementary Assessment (Last to Complete) on only one occasion.
- If you are enrolled in a nested course and intend to proceed directly to the next stage of the course, you are not eligible for Last to Complete in your current stage. You are only entitled to one Last to Complete while completing a nested course.

If your application for Supplementary Assessment (Last to Complete) is approved, you will be notified by email to your Swinburne email account.

Fields marked with  are mandatory

PERSONAL DETAILS

Student ID:		<input type="text"/>	Title:		<input type="text"/>
Surname:		<input type="text"/>			
Given Names:		<input type="text"/>			
Address:		<input type="text"/>			
Contact Number:		<input type="text"/>			
Course Code:		<input type="text"/>			
Course Title:		<input type="text"/>			
Faculty:		<input type="text"/>			

UNIT OF STUDY FOR WHICH SUPPLEMENTARY ASSESSMENT (LAST TO COMPLETE) IS SOUGHT

Unit of Study Code:		<input type="text"/>
Unit of Study Title:		<input type="text"/>
Tutor/Lecturer:		<input type="text"/>
Teaching Period Attempted:		<input type="text"/>

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STUDENT DECLARATION

I hereby apply to be granted Supplementary Assessment (Last to Complete) for the named unit of study.

Signature:

Date:

PRIVACY STATEMENT & DISCLAIMER

Swinburne University of Technology collects, uses and destroys personal information in order to locate student invoices and verify the student's postal address and will use the information only for locating student invoices and verifying the student's postal address in accordance with our [Privacy Policy](#).

I understand that if the request that I submit is incorrect or incomplete that my request will not be processed.

I agree to the terms stated above

OFFICE USE ONLY

TO BE COMPLETED BY STUDENT ADMINISTRATION				
Date received by Student Administration				
Has the student achieved a final mark of 40% or more?		<input type="radio"/> Yes	<input type="radio"/> No	
Did the student completed the Unit in the final 12 calendar months		<input type="radio"/> Yes	<input type="radio"/> No	
Date sent to Convenor / Faculty				
Date returned to Student Administration				
TO BE COMPLETED BY CONVENOR (FACULTY)				
Has the student completed all assessment requirements for this Unit of study this teaching period?		<input type="radio"/> Yes	<input type="radio"/> No	
Did the student make a genuine attempt in this Unit, including fulfilling all assessment requirements?		<input type="radio"/> Yes	<input type="radio"/> No	
If your answer is NO, please give reasons below;				
CONVENOR'S RECOMMENDATION				
Yes	No	Convenor's Name	Convenor's Signature	Date
If recommended, details of supplementary assessment to be undertaken:				
DEAN OR DELEGATE APPROVAL (AWARDING FACULTY)				
Approved / Not Approved	Name	Signature	Date	
TO BE COMPLETED BY STUDENT ADMINISTRATION				
Student notified to Swinburne email account				
Student Administration Officer's Name	Student Administration Officer's Signature	Date		