

Adverse Circumstance Application Coversheet

Application Reference ID:	132242
Student ID:	3155112
Name:	Julius Myszkowski
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Reason for Application:	Health Grounds

Course	Campus - Location	Assessment Item	Desired Outcome	Reason	Due Date
SENG4400	Callaghan Campus - Callaghan	Assignment 2	Extension of Time	Health Grounds	08/05/2015

Supporting Documentation:
Medical Certificate

Please attach this coversheet with your supporting documentation and present this to one of the following locations for your application to be processed:

- Shortland Hub** University of Newcastle
University Drive Level 3, Shortland Union Callaghan NSW 2308
Ph: +61 2 4921 5000
studenthubs@newcastle.edu.au
- Ourimbah Hub** University of Newcastle
Campus Information and Services Centre Ourimbah Campus 10 Chittaway Rd Ourimbah NSW 2258
Ph: 02 4348 4000
studenthubs@newcastle.edu.au
- Hunter Hub** University of Newcastle
University Drive Student Services Centre Callaghan NSW 2308
Ph: +61 2 4921 5000
studenthubs@newcastle.edu.au
- City Hub** University of Newcastle
Ground Floor University House Newcastle NSW 2300
Ph: +61 2 4921 5000
studenthubs@newcastle.edu.au
- ELFS Hub** University of Newcastle
University Drive McMullin Building Callaghan NSW 2308
Ph: +61 2 4921 5558
enabling@newcastle.edu.au
- Port Macquarie Hub** University of Newcastle
The University of Newcastle Cnr Oxley Hwy and Widderson St Administration - A Block Port Macquarie NSW 2444
Ph: +61 2 6581 6262
pmq-hub@newcastle.edu.au

Sydney Precinct

University of Newcastle
The University of Newcastle Cnr Bathurst and Sussex Sts Sydney NSW 2000
Ph: +61 2 82626400
sydney-generalenquiry@newcastle.edu.au

Please note - your application will not be processed until the required supporting documentation has been submitted to one of the Hubs listed above. You need to submit your documentation within 3 calendar days or your application may be rejected.
You can review the status of your application online with your Uni ID and Password.

Declaration

I hereby confirm that the information provided in this application is correct and true to the best of my knowledge.

I understand that the University may take steps to verify the authenticity of any documentation provided with an application.

I understand that the supply of false information, false or falsified documentation, will result in the rejection of the adverse circumstances application and/or the cancellation of the adverse circumstances approval authorisation, and may result in disciplinary action under the Student Misconduct Rule [000935].

I acknowledge that I am required to retain my documentation for safe keeping for a period greater than six months after the completion of the relevant term.

Signed:

Date:

Office use only

Processed:

Date: