

## NPR QS09\_2 Mitigating Circumstances Form Version 23 01

## **Application for Mitigating Circumstances or Special Consideration**

"College abbreviation" Programme Title  Module Code  Module Title  Academic Staff Member  Please identify the Assessment Type by placing an [X] in the applicable box below  Assessment Type  [] Coursework  In Class Test  Mid Term Exam  Final Exam  Date of Assessment  Appropriate evidence such as a medical certificate, a letter from a student counsellor, or other documentary evidence must accompany any application for special consideration.  Reason for request for Special Consideration / Mitigating Circumstances (Please outline the details below and ensure you attach the appropriate documentary evidence.)  Have you attached the supporting documentary evidence?  [] Yes  [] No	Title	*College* Student ID	Given Name		Family Name			
*College abbreviation* Programme Title  Module Code  Module Title  Academic Staff Member  Please identify the Assessment Type by placing an [X] in the applicable box below  Assessment Type  [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]								
Module Code  Module Title  Academic Staff Member  Please identify the Assessment Type by placing an [X] in the applicable box below  Assessment Type  I	UK Add	lress (or equivalent)						
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Assessment Type    Coursework	Module	Code						
Assessment Type  [1] Coursework  In Class Test  [1] In Class Test  [1] In Class Test  [2] In Class Test  [3] In Class Test  [4] In Class Test  [5] In Class Test  [6] In Class Test  In Cl	Module	Title						
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PLEASE NOTE: Submitting an application for special consideration does not guarantee special consideration will be granted.

Student Declaration:

I declare that all information included in this application is correct and factual the best of my ability and knowledge.

Student Signature	Date

For Office Use Only

Signature of receipt by Academic Services team							
Name Date							
Signature of approval by the Manager of Academic Services							
Name Date							
Has Special Consideration/Mitigating Circumstances been appro Manager of Academic Services?	ved by [ ] Yes	[] No					
Has the student been notified?	[] Yes	[ ] No					
Has Attendance Record been amended (if applicable)?	[] Yes	[ ] No					
Has the Academic Sessional(s) been notified?	[] Yes	[] No					
Any other Comments (please us the space below)							