

MITIGATING CIRCUMSTANCES FORM 2018/19

Mitigating Circumstances are **unforeseen** or **unexpected** personal or medical circumstances which might adversely affect your performance and/or prevent you from completing an assessment. You should only present a case to the Mitigating Circumstances Committee if you consider it **serious enough**, and the **timing critical**, to have affected your performance in your assessed work and examinations.

You must include some **supporting documentation** in the form of medical notes, death certificates, counselling services letters, or letters/notes from other professional bodies to support your application. You should include full information outlining the circumstances and full details of all periods that this submission is to take into account.

The form and documentation should be submitted to the **Education Office, Room G.020** by the relevant deadline. It is essential that you inform us of any mitigating circumstances **before** the start of the examination period. The only forms which will be accepted after this are those relating specifically to events occurring during the examination period:

JANUARY EXAMS: 14 JAN 2019 and for incidents during the exam period ONLY, **28 JAN 2019**

MAY/JUNE EXAMS: 13 MAY 2019 and for incidents during the exam period ONLY, **10 JUN 2019**

RESIT EXAMS: 19 AUG 2019 and for incidents during the exam period ONLY, **02 SEPT 2019**

Please complete the form below fully – the information requested is important and missing information will mean that the process will be delayed.

ID Number _____ Last name _____ Forename _____

Degree Programme _____ Year 1st 2nd 3rd 4th

I would like the Mitigating Circumstances Committee to consider my application for the following: **(continue overleaf as necessary)**. Please ensure that you give full details of how you feel the illness/event may have affected your performance (e.g. lost 2 days of revision, missed exam).

Period affected: from _____ to _____

Are your circumstances: Medical Personal Other

Supporting documentation: _____ is this supplied to follow

Examinations – please list all those affected.

Course Unit Code					
Date of Examination					
Were you absent from the exam?					

Other periods of absence (other than examinations). you must identify the course units affected and period(s) of absence. If you need to, please use the back of this form for any further details.

Course Unit Code					
Dates of absence					

Signature _____

Date _____

[Empty rectangular box for student response]

Office use only:

Form signed & dated by student

Date submitted to Education OfficeAdministrator initial.....