



## APPLICATION FOR SPECIAL CONSIDERATION

It should be noted that applications for Special Consideration will be assessed in accordance with the OIHE policy and possible outcomes include:

1. Rejection of the application
2. Approval of an extension to the due date for submission of an assessment task
3. Approval for an additional assessment task to be completed and submitted.
4. Approval of a deferred examination.

**PLEASE NOTE:** *Misreading the examination timetable, examination anxiety or returning home will not be grounds for an application for Special Consideration*

*Religious or faith-based issues are not in themselves grounds for special consideration, they may however be used in support of an application that meets the eligibility criteria set out in the OIHE Special Consideration Policy.*

| <b>Course title:</b>  |  | <b>Student Number:</b>                   |  |
|---|--|--|--|
| <b>Family Name:</b>   |  | <b>Other names:</b>                      |  |
| <b>I request Special Consideration in the following subject(s):</b>   |  |  |  |
| Subject Code  | Subject Name                           | Name of lecturer/tutor                   | Assessment due date / Examination date |
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|   |  |  |  |
| <b>Reasons for Special Consideration</b> (Tick one of the following grounds for Special Consideration)  |  |  |  |
| <input type="checkbox"/> Medical Reasons  | <input type="checkbox"/> Compassionate | <input type="checkbox"/> Hardship/trauma | <input type="checkbox"/> Other         |
| <b>Additional Information and supporting documentation:</b><br>(Please provide information about the event(s) which have impacted on your studies. You will also need to provide supporting documentation from a recognised authority, where appropriate. For example, if you are applying for Special Consideration on medical grounds if you will need to attach a valid medical certificate from a Health Care Professional. Examples of other forms of supporting documentation include letters from social workers or psychologists and Statutory Declarations from yourself or others who were involved in the event(s).) |  |  |  |
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### Student Declaration

I declare that the information provided in this *Application for Special Consideration Form* is true, complete and an accurate representation of the grounds on which I am seeking Special Consideration.

**Signature:** .....

**Date:**

.....



|   |  |
|---|--|
| <b>Head of School (HE) Decision</b>   |  |
| <input type="checkbox"/> Recommended  | <input type="checkbox"/> Not Recommended |
| <b>Reason (s)</b>   |  |
| <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>   |  |
| <b>Describe Action to be Taken:</b>   |  |
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| <b>Signature:</b> ..... <b>Date:</b> .....  |  |