|  |  |
| --- | --- |
| TAB_col_white_background.eps | **Faculty of Biology Medicine and Health | School of Health Sciences**  **APPLICATION FOR EXTENSION TO DEADLINE FOR ASSESSED WORK** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| If you feel that you are unable to meet a forthcoming submission deadline due to unforeseeable/unavoidable circumstances this form should be completed and returned to the PSS Examinations office **at least 24 hours** prior to the submission deadline of the assessment affected to enable reasonable notice to enable a decision to be made by your respective Programme. | | | | | | | | | | | | | | | | | | | |
| Please see attached documentation for more information regarding mitigation. All relevant sections must be completed giving as much detail as possible to ensure a timely outcome can be achieved. | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Student ID Number:** | | |  |  |  |  |  |  |  |  | **Academic Advisor:** | | | |  | | | | |
| **Family Name:** | | |  | | | | | | | | **Other Name(s):** | | | |  | | | | |
| **Academic Programme:** | | |  | | | | | | | | | | | | | | | | |
| **Start Date (Month/Year):** | | |  | | | | | | | | | **Year of study:** | | |  | | | | |
| **Student Email Address:** | | | to | | | | | | | | | | This will be the address we will correspond with you regarding your application | | | | | | |
| **Are you in receipt of a funded studentship?** (Circle) | | | **Yes** | | **No** | | **If yes please give details**: | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Assessment affected** | | | | | | | | | | | | | | | | | | | |
|  | **Unit Code** | **Unit Title (Assessment)** | | | | | | | | | | | | **Original Submission Deadline** | | | | | |
| **1)** |  |  | | | | | | | | | | | |  | | | | | |
| **2)** |  |  | | | | | | | | | | | |  | | | | | |
| **3)** |  |  | | | | | | | | | | | |  | | | | | |
| **Amount of extension time requested:** | | | | | | | | | | | | | |  | | | | | |
| Please state why you are requesting an extension. Please attach relevant documentary evidence. Please note that extension requests will only normally be considered with supporting 3rd party evidence. | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **NB\* Please note that in requesting an extension there may be a delay in the publication and ratification of your result.** | | | | | | | | | | | | | | | | | | | |
| **Evidence Attached** | | | | | | | | | | | | | | | | **Yes** |  | **No** |  |
| If you are in the UK subject to immigration regulations i.e. you are a non EU citizen and need permission to enter/remain in the UK you must consult the International Advice Team regarding visa implications | | | | | | | | | | | **Are you an International Student?** | | | | | **Yes** |  | **No** |  |
| **Student Declaration:**  I confirm that the information I have given is correct to the best of my knowledge | | | | | | | | | | | **Signed:** | | | | | **Date:** | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***For Office Use*** | | | | | | | | | | | |
| **Examinations Officer/Programme Director:** | | | | |  | | | | | | |
| **Please fill in either of the following:** | | | | | | | | | | | |
| **Extension NOT agreed.** | | **Yes** |  | **No** |  | **Extension agreed.** | **Yes** |  | **No** |  |  |
| Reason: | | | | | | New submission Date: | | | | | |
| **Signed:** |  | | | | | | | **Date:** | |  | |
| **The student will be informed via email within 48 hours of the submission of the extension request**  **Please note that a copy of this form and any supporting information will be kept on the students file for future reference.** | | | | | | | | | | | |

|  |
| --- |
| **Further Information** |
| Sometimes circumstances or events beyond your control may adversely affect your ability to perform in an assessment to your full potential or to complete an assignment by the set deadline. In such cases ***mitigation*** may be applied. |
| It is important to remember that, in order to qualify for consideration, the adverse circumstances or events must be ***unforeseeable***or ***unpreventable***as far as you are concerned, and sufficiently disruptive to have a *significant adverse* effect on your academic performance or your ability to complete assignments by the due date. |
| ***Circumstances or events that merit consideration*** may include:   * suffering a serious illness or injury; * the death or critical/significant illness of a close family member/dependant; * a significant family crisis leading to acute stress; * and unplanned absence arising from such things as jury service or maternity, paternity or adoption leave. |
| ***Circumstances or events that would not normally merit consideration*** include:   * holidays or other events that were planned or could reasonably have been expected; * assessments that are scheduled close together or on the same day; * misreading the timetable for examinations or otherwise misunderstanding the requirements for assessment; * inadequate planning or time management; * failure, loss or theft of a computer or other equipment, including inability to print off work for whatever reason; * consequences of paid employment (except in some special cases for part-time students); * exam stress or panic attacks not diagnosed as illness; * and minor disruption in an examination room during the course of an assessment. |
| Mitigation ***will not result in the changing of any marks***, unless penalties for late submission are waived after an assignment has already been marked. Instead, mitigation may result in some marks being disregarded and the assessment being excused because it was adversely affected and subsequently a further attempt being awarded. |