



Leicester Global Study Centre
LGSC CPR QS09

Application for Mitigating Circumstances or Special Consideration

Form with fields: Title, \*College\* Student ID, Given Name, Family Name, UK Address (or equivalent), \*College abbreviation\* Programme Title, Module Code, Module Title, Academic Staff Member, Assessment Type (Coursework, In Class Test, Mid Term Exam, Final Exam), Date of Assessment, and Reason for request for Special Consideration / Mitigating Circumstances.



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Have you attached the supporting documentary evidence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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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 approved by Manager of Academic Services?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the student been notified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has Attendance Record been amended <i>(if applicable)</i> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the Academic Sessional(s) been notified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any other Comments <i>(please use the space below)</i>		