

EXTENUATING CIRCUMSTANCES (EC) CLAIM FORM



SECTION 1: FOR COMPLETION BY THE STUDENT

Please refer to the Extenuating Circumstances regulations in the [UCL Academic Manual](#) before completing this form. Download this form, complete it and submit it digitally - see note at bottom of page.

Forename(s):		
Surname:		
Student number:		
Programme:		
Year of Study:		
Department/Academic Unit:		
Contact Number:		
Contact Email Address:		
Nature of the Extenuating Circumstances (EC): <i>Please explain what has happened and how it has affected your performance at assessment</i>		
Assessments affected by the EC: <i>Please list all affected assessments (coursework identifier and/or exam) and the module codes</i>		
Dates affected by the EC:	From:	To:
What form of mitigation are you seeking? <i>Your request will determine how your claim is processed by your department</i>	<ul style="list-style-type: none"> • Extension of up to 1 week • Special Assessment Arrangements • Other 	
Signature of applicant:	Date:	

You should complete this pdf form using Adobe Acrobat or similar. You should email the completed form to the department's Teaching and Learning Manager (n.gosai@ucl.ac.uk) as soon as possible and no later than one week after the circumstance has taken place. Section 2 may be completed digitally if the person signing is able to digitally sign and/or stamp the document. Alternatively, scanned copies of Section 2 or other relevant documentation should be added to this pdf form. If you are unable to obtain this supporting evidence within the week deadline, then submit the form without it and send the evidence separately when it is available.

SECTION 2: SUPPORTING EVIDENCE

To be completed by an appropriate, verifiable and independent authority such as: a registered medical practitioner, solicitor, coroner, registrar of births, marriages and deaths, police officer, fire officer etc

This document may be completed and signed digitally and returned by email to the student making the claim. Alternatively, a printed copy of the form should be completed and returned to the student with other relevant correspondence or certification on headed paper.

Full name:	
Role:	
Authority/ organisation:	
<i>Please describe the nature and severity of the student's Extenuating Circumstances and describe any consequences of the circumstance that may be relevant</i>	
<i>Please provide the dates when the circumstance started and when the student was/will be fit to return to study:</i>	
Signature:	Date:
Official Stamp (where available – where no stamp is available, evidence must be supplied on headed paper):	

SECTION 3: FOR OFFICE USE ONLY**Extensions of Up to One Week (Programme Director, Departmental Tutor or Chair of a Programme Board of Examiners Approval)**

Does the EC meet the criteria outlined in the UCL 'Acceptable Grounds for Extenuating Circumstances'?

Is the claim supported by appropriate evidence?

Extension approved?

New deadline:

Staff name:

Role:

Staff signature:

Date:

Please ensure the details of the extension are communicated to the student, the teaching department (where applicable) and to the Faculty or Departmental Extenuating Circumstances Panel as soon as possible.

Special Assessment Arrangements Panel Referral

Date received by SAAP:

Referrals to the Special Assessment Arrangements Panel will be considered under the Special Assessment Arrangements Procedures.

Faculty/ Departmental Extenuating Circumstances Panel Decision

Does the EC meet the criteria outlined in the UCL 'Acceptable Grounds for Extenuating Circumstances'?

Is the claim supported by appropriate evidence?

EC approved?

Accept

Reject

Pending - further evidence required

Recommendation:

FECP/ DECP Chair's name:

FECP/ DECP Chair's signature:

Date:

Please ensure the details are recorded on Portico, communicated to the student and transmitted to the Programme Board of Examiners as soon as possible.