Reasonable Adjustment/Special Consideration Request Form

This form is to be completed in relation to the Reasonable Adjustments and Special Considerations Policy.

PERSONAL DETAILS			
Learner Name		Date of Request	
Learner ID		Assessor/Tutor	
Awarding Organisation		Assessment Unit/Activity	
Qualification/ course			

SECTION 1: Type of Request			
☐	Reasonable Adjustment (before assessment)	☐	Special Consideration (after or immediately before assessment)

SECTION 2: Details of Circumstances

SECTION 3: Requested Support					
☐	Extra assessment time	☐	Reader	☐	Large print
☐	Rest breaks	☐	Scribe	☐	Oral questioning
☐	Alternative location	☐	Assistive technology	☐	Other

SECTION 4: Supporting Evidence			
☐	Medical note	☐	Medical certificate
☐	Previous adjustment record	☐	Other

SECTION 5: Learner Declaration	
Signature:	Date:

Internal Review and Decision			
Reviewed by		Date	
Evidence sufficient?	☐ Yes ☐ No		
Decision	☐ Approved ☐ Approved with modification ☐ Referred to Awarding Organisation ☐ Not Approved		
Reason for Decision:			
Assessment Integrity Check	☐ Maintains validity ☐ No unfair advantage ☐ Meets qualification requirements		
Final Authorisation		Date	