 **Extenuating Circumstances Application Form**
To be completed and signed by the student

|  |  |  |  |
| --- | --- | --- | --- |
| Student ID: | Click or tap here to enter text. | Name: | Click or tap here to enter text. |
| Course: | Choose an item. | Level: | Choose an item. |

***The Academic Regulations for students and the dates of the Extenuating Circumstances Panel meetings are available at:*** [*https://portal.leeds-art.ac.uk/academic-regulations-22-23*](https://portal.leeds-art.ac.uk/academic-regulations-22-23)

[ ]  I have applied for an Academic Support Extension

**Category in which the extenuating circumstances falls**:

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  Medical | [ ]  Bereavement | [ ]  Personal | [ ]  Other, please specify: |

Click or tap here to enter text.

**Evidence**:

You must submit supporting documents or evidence.

Please refer to the [Extenuating Circumstances Procedure](https://portal.leeds-art.ac.uk/node/6826) document if you have any questions on types of evidence accepted.

***You must submit this form*** ***and supporting evidence before the published deadline/s for submission or within 10 calendar days of the extenuating circumstance.***

**Group Working:**

|  |  |
| --- | --- |
| [ ]  I am working as part of a group for this submission | [ ]  I am not working as part of a group  |

**List of modules you are applying for:**

|  |  |  |
| --- | --- | --- |
| Module Code | Module Title | Submission Deadline(original or approved extension)  |
|  |  | Click or tap to enter a date. |
|  |  | Click or tap to enter a date. |

**Personal Statement:**

Please explain the nature of the circumstance and how you believe this has impacted on your ability to submit work to the original submission deadline.

Please add as much text as you feel is necessary.

|  |
| --- |
| Click or tap here to enter text. |

**Extension information:**

Standard extension outcomes are 1 week.

You are advised to continue working on the assessment/s you are claiming for and aim to submit your work as soon as possible.

***Please be advised***

*If you submit your work by the submission date for the module/s you are applying for your extenuating circumstances application will not be considered by the Extenuating Circumstances Panel. By submitting your work it will be assumed that you are fit to study.*

If you have any queries please contact headministrators@leeds-art.ac.uk

I confirm that the extenuating circumstances and supporting evidence are genuine and understand that any false claim would be subject to disciplinary action.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |

Please send your completed form and evidence to headministrators@leeds-art.ac.uk