# **Extenuating Circumstances Form**

City, University of London (City) validates higher education programmes offered at ArtsEd as leading to awards of the University. ArtsEd therefore follows City, University of London’s Extenuating Circumstances procedures through our own [*Extenuating Circumstances Policy*](https://artsed003.blob.core.windows.net/policy/extenuating-circumstances-policy.pdf).

Management and consideration of claims for Extenuating Circumstances is in accordance with [***City’s Assessment Regulations (Regulation 19)***](https://studenthub.city.ac.uk/__data/assets/pdf_file/0007/453652/Senate-Regulation-19-Assessment-Regulations-2022-23-v2.5.pdf)**.** The Regulations define Extenuating Circumstances as: ‘Circumstances which are unforeseen and outside a student’s control and which can be shown to have had a direct and substantial impact on their academic results. This may include an impact on capacity to study prior to an assessment, on ability to complete an assessment, and/or on performance during an assessment’.

**Examples of the types of Extenuating Circumstances that might be accepted include ill-health, bereavement, or other personal issues which were unexpected or outside of a student’s control and which may have affected preparation for an assessment or performance during the assessment itself. Circumstances that could have been foreseen and/or prevented will not normally be accepted.**

To apply for Extenuating Circumstances, you should complete this from electronically and submit it by emailing to hecourseoffice@artsed.co.uk. If you can, send your form and accompanying evidence (if relevant) together so you can be sure they have all been received.

If you are submitting evidence but unable to obtain supporting documentation by the deadline, you are still able to submit your Extenuating Circumstance form without this evidence. If you need to submit evidence after you submit your form, you will be able to note this on your Extenuating Circumstances form and suggest a date by which you hope to provide the evidence.

Please note it is your responsibility to ensure any outstanding evidence is submitted, outstanding evidence should be submitted by email to hecourseoffice@artsed.co.uk. If you are submitting evidence, you must not delay submitting your Extenuating Circumstances form on the basis of not having supporting documentation by the deadline for submission – this will not be considered a valid reason for a late submission of an Extenuating Circumstances form.

# **Section One: My Details**

|  |  |
| --- | --- |
| **Full Name** |  |
| **Programme of Study** |  |
| **ArtsEd E-mail Address** |  |
| **Year of Study (for BA students)** |  |

# **Section Two: My Extenuating Circumstances**

Please let us know how you are applying for Extenuating Circumstances by ticking the appropriate box.

|  |  |
| --- | --- |
|  | **Extenuating Circumstances with Self Certification only***Only relevant for medical circumstances lasting 1-7 days* |
|  | **Extenuating Circumstances with Evidence**  |
|  | **Extenuating Circumstances without Evidence** *If this option is selected, please provide reasons for not submitting evidence below.* |

**Statement about my Extenuating Circumstances**

*In your ‘Statement about my extenuating circumstances’ you should cover:*

* *What your extenuating circumstances were including the relevant dates*
* *How the extenuating circumstances affected your performance or prevented you from attending or submitting work on time*
* *Why the circumstances were unforeseen and outside your control*
* *The steps you took to address the extenuating circumstances at the time (e.g. seeing a doctor/ counsellor, seeking support through relevant agencies)*
* *Advice and guidance you sought at the time (e.g. consulting your personal tutor, seeking the advice of the invigilator)*
* *Justification for not submitting evidence if you have not done so*

**Assessment or period affected**

|  |  |  |
| --- | --- | --- |
| **Module or Unit component** | **Assessment type (coursework, practical assessment etc)** | **Deadline or date of assessment** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# **Section Three: Supporting Evidence**

Please list each item of evidence to support your claim. If the evidence is to follow, please include the date you intend to provide the evidence.

|  |  |
| --- | --- |
| **Type of Evidence (i.e. GP/medical letter, supporting statement, police report)** | **Date due to be submitted (if not provided already)** |
|  |  |
|  |  |
|  |  |

# **Section Four: Declaration**

By signing and submitting this form, you confirm that you:

* have read the guidance accompanying this form and the relevant section of City’s Regulations
* have provided information that is true and accurate to the best of my knowledge

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature** |  | **Date** |  |