**EXTENUATING CIRCUMSTANCES CLAIM FORM 2022-23**

Extenuating circumstances are defined as serious unforeseen, unpreventable circumstances that significantly disrupt a student’s ability to undertake assessment*.*

**Please indicate which level of claim you are requesting:**

|  |  |
| --- | --- |
| **Programme Level Request for Extension of Submission Deadline**  (to request a delay to submission of coursework of up to 10 working days) |  |
| **University Level Extenuating Circumstances**  (for situations which affect the main examination period or delays of coursework submission of more than 10 working days) |  |

This form must be completed if you believe that illness or other circumstances have adversely affected your academic performance. It is your responsibility to ensure that you submit your form fully completed so that the Programme or University sub-Committee has all the available information on which to base its decision.

**Late submissions of EC forms will not normally be accepted. Please note that if you have submitted coursework or sat an exam then you are stating you are “fit-to-sit” and are not expected to submit an Extenuating Circumstances claim, in line with the Fit to Sit Policy.**

*Please refer to the Extenuating Circumstances Policy and guidelines when completing this form*. All claims must be substantiated by third party, independent written documentary evidence, such as a medical certificate, or a letter from the Student Wellbeing/Counselling Service.

Please submit this form to the relevant Department Email for Programme Level extensions (see email addresses below) or Exams for University level Extenuating Circumstances as soon as possible after the events occur, even if you do not have all of the supporting evidence available at the time.

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| --- |
| **Regnum:** |
| **First Name:** |
| **Surname:** |
| **Level of Study:** |
| **Programme:** |
| **Course Lead:** |
| **St Mary’s University Email Address:** |
| **Are you currently Registered with St Mary’s Student Wellbeing Service?** |

**DEFERRAL OF ASSESSMENT – *(please provide details of the assessments affected)***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Module(s) code(s) | Name of Module Convenor | Assessment Type  (e.g. Essay/Exam) | Assessment Deadline/ Date of Examination(s) | Semester (1/2/Resit) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Please state below details of the illness experienced or of other extenuating circumstances affecting your academic performance. You should also indicate how these circumstances affected your work. If these are of a particularly personal nature, you should submit details of your circumstances, together with supporting documentary evidence, in a sealed envelope, marked “Private and Confidential”.

**DECLARATION OF EXTENUATING CIRCUMSTANCES**

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| --- |
| Please give details showing how the circumstances impacted upon your academic performance, and **please include dates** of when you were affected: |

**SUPPORTING DOCUMENTARY EVIDENCE**

|  |  |  |
| --- | --- | --- |
| **The most common extenuating circumstances are listed below with examples of the kinds of documentary evidence required to support your case. Please tick the relevant box to show which evidence you are attaching to this form.** | | |
| Illness (*medical certificate/letter from an appropriate medical adviser/University Student Support and Counselling Service*) | |  |
| Hospitalisation (*medical evidence*) | |  |
| Family Illness (*medical certificate/letter from appropriate medical adviser* *(eg family doctor*) | |  |
| Bereavement (*copy of death certificate/supporting letter*) | |  |
| Financial (*Bank Statement*) | |  |
| Acute Personal/Emotional Circumstances (*letter from Student Wellbeing/Counselling Service or equivalent*) | |  |
| Dated Learning Support Form from Student Services | |  |
| Other Evidence: please list | |  |
| Supporting evidence is not yet available. Please give the date by when it is expected. Tick the relevant box above to show the evidence you will be supplying | |  |
| Signature: | Date: | |

Please note that all claims must be supported by third party evidence, a claim without evidence will be rejected.

Please return the completed form, together with supporting documentary evidence to:

1. **Programme level claims** to your departments email as below:

[BLSadmin@stmarys.ac.uk](mailto:BLSadmin@stmarys.ac.uk) for Business, Law & Society

[EDUadmin@stmarys.ac.uk](mailto:EDUadmin@stmarys.ac.uk) for Education

[TLAadmin@stmarys.ac.uk](mailto:TLAadmin@stmarys.ac.uk) for Theology & Liberal Arts

[SAHPSadmin@stmarys.ac.uk](mailto:SAHPSadmin@stmarys.ac.uk) for Sport, Health and Applied Science

1. **University Level claims** to Exams [exams@stmarys.ac.uk](mailto:exams@stmarys.ac.uk), clearly marked as ‘Extenuating Circumstances Claim REGNUM’