

**Application for Mitigation (Higher Education) College courses.**

**GUIDELINES**

An application for mitigation should be completed when, due to personal mitigating circumstances, you are unable to complete unit assessments (examination, presentation or coursework). This procedure is intended to establish a consistent and fair practice for all students across the College with regard to the recording and receipt of mitigating circumstances.

**N.B.** **You must submit your Application for Mitigation prior to the assessment submission date.** In exceptional circumstances completed forms may be accepted up to 14 days after the submission date. Any information received outside of this time period will not be considered, unless you can provide evidence that you were prevented from meeting the deadline by circumstances outside your control.

**SECTION A**

**All applications for mitigation must be substantiated by independent documentary evidence, such as a medical certificate, letter from an employer, statement from a member of academic staff, statement of attendance from a counsellor, etc.**

1. Your name and course details
2. The reason you are applying for mitigation, if this is of a sensitive nature a very brief note will suffice with a sealed envelope attached (please mark the envelope as confidential)
3. The nature of the evidence you are providing to support your application e.g. medical certificate and the date for which that evidence applies
4. Record the unit(s) for which the application is to be considered, the unit tutor, type(s) of assessment for all tasks in the unit and the assessment deadline date

**SECTION B**

This should specify **in detail** how your illness or personal circumstances have affected your ability to undertake the assessments. Please remember to sign and date the application.

Following completion of the application form you must call the HE Team at the Aireville Campus on 01756 708051 to arrange the submission of your application form and supporting documentation.

Incorrectly completed application forms will not be considered, and will be returned for proper completion.

N.B. The HE Team are not normally available during the evening

The decision will be made by the HE Team, wherever possible, within three working days of receipt of your application. Your Course Tutor will be made aware of the decision. **It is your responsibility** to follow up the decision with the HE Team. Please keep a copy of your completed application form.

**Please be assured that matters of a very personal nature will be treated with discretion and sensitivity. In exceptional circumstances it is possible to submit details of mitigation for the sight of the Senior Academic Quality Officer (HE) only.**

If approved, the extended assessment deadline date will be set by the Mitigation Panel



## HE Application for Mitigation for Higher National courses

1. All sections of this form **must be completed**. The form should then be printed and signed. You should then telephone the HE Team on 01756 693863 or 708051 to arrange submission of the application
2. The independent documentary evidence **must be attached**.
3. If your mitigating evidence is confidential it should be submitted in a sealed envelope and marked accordingly.
4. **It is your responsibility** to follow up the decision with the HE Team. Wherever possible, the decision will be made within three working days of receipt of the application

**See guidelines for completion**

**SECTION A: DETAILS OF STUDENT, COURSE AND MITIGATION**

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| --- | --- | --- |
| 1. **STUDENT NAME:** | | **STUDENT Ref:** |
| **COURSE TITLE:** | | **YEAR OF STUDY:** |
| 1. **REASON FOR APPLICATION (e.g. illness)** Please provide details: | | |
| 1. **NATURE OF EVIDENCE (e.g. Medical Certificate):** | **DATES FOR WHICH EVIDENCE APPLIES**: | |

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| 1. **I wish the evidence to be considered for the following assessment(s). Ensure you include all assessments which may be affected by your circumstances** | | | | **FOR COMPLETION BY OFFICE** |
| Module Title | Unit Tutor | Assessment Type e.g. presentation, portfolio (include all tasks you would like to be considered) | Assessment Deadline Date | Mitigation Accepted/  Not Accepted |
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| **Section B**  **DETAILS OF CIRCUMSTANCES – EVIDENCE MUST BE ATTACHED.**  This should specify in detail how your illness or personal circumstances have affected your ability to undertake the assessment(s). Please provide as much detail as possible as the decision will be based on the information you provide - you may attach a separate letter if you wish. |

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| I confirm that the information provided is accurate and the evidence is genuine |
| STUDENT’S SIGNATURE: |

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| **FOR COMPLETION BY MITIGATION PANEL** |
| DATE APPLICATION RECEIVED: |
| APPLICATION FOR MITIGATION HAS / HAS NOT BEEN APPROVED |

|  |  |  |
| --- | --- | --- |
| Name: | Signature: | Date: |
| Name: | Signature: | Date: |

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| **Assessment Deadline Date** (N.B. Failure to submit the assessment(s) by this deadline will result in a recording of non-submission and a mark of 0 awarded): |