

Extenuating Circumstances Form (ECF)

NELSON COLLEGE LONDON

Student name:			
Programme of study:			
Course start date:		Student ID:	
Email address:		Mobile:	

Unit Title	Type of Assessment	Date of Assessment	Did you attempt this piece of assessment? if yes, give submission date	Would you like to extend the deadline?	State the submission date being requested

Reason for Extenuation:

Please provide full details of your circumstances and explain how they would impact or have impacted on your academic performance. *(Continue on a separate sheet of paper if needed and attach with this form)*

Supporting Evidence:

Please list below each piece of supporting evidence you have submitted with this form (without valid and reliable document no extenuation may be granted)

Retrospective Submission:

If you have attempted your assessment(s) despite your extenuating circumstances, please state why you did not submit the ECF prior to the assessment deadline.

Declaration:

I declare that to the best of my knowledge, all information given is true and all evidence submitted is genuine and I understand that a fraudulent claim may lead the College to take action under its disciplinary procedures.

Student Signature:

Date:

Decision (Office use only):

Is the extenuation granted? (Please circle)

Yes/ No

Justification of the decision: Please provide the reasons for this decision and if there are any actions to be taken in respect of this claim.

Name:

Signature:

Date: