

All sections of this form must be completed.
Please read our Introductory Notes and Student Guidance before completing this Form
The deadline for submission of a claim is two weeks from the published submission date of the component concerned or the date of the examination, presentation, class test etc.
Please submit to: QAHE.LondonMetMitigatingCircumstances@qa.com

PERSONAL DETAILS

Surname: First names: Student ID number:

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Full Time / Part Time (Delete as appropriate)

Type of Request: Deferral (evidence required)

NON SUBMISSION/NON ATTENDANCE

Module Code	Module Title	Component affected: Assessment 1, Assessment 2, or Assessment 3	Submission deadline or date of exam etc.

IMPORTANT NOTE – If your claim for any component above is submitted after the two-week deadline, your claim for that component will only be considered if you can demonstrate good reason for the delay in submitting your claim. Being unaware of the deadline will not be accepted as good reason.

Please provide a brief explanation as to why your claim is late:

DETAILS OF MITIGATING CIRCUMSTANCES AND/OR SELF-CERTIFICATION

Please briefly describe your circumstances and their impact on your studies, making reference to your supporting evidence, and being specific about dates (*Continue on a separate sheet of paper if necessary*).

IMPORTANT NOTE – ALL STUDENTS MUST TICK ONE OF THE BOXES BELOW:

Does your claim relate to a disability, Specific Learning Difficulty or a medical or health condition, including mental health that has a long-term (12 months or more) and substantial negative effect on your ability to carry out day-to-day activities?

- ☐ Yes (Your details will be passed to the QAHE Welfare Department) who will contact you to discuss what, if any, support needs you may have.)
- ☐ No However, the Mitigating Circumstances Panel has a duty under Equalities Legislation to pass your details to the QAHE Welfare Department if your statement and/or supporting evidence provides information that could reasonably be considered disclosure of a disability, Specific Learning Difficulty or a long-term medical or health condition, including mental health.
- ☐ Yes but do not pass my details to the QAHE Welfare Department.
(QAHE Welfare Department. By choosing this option you accept that this may prevent or limit disability-related support that you may be eligible for. You can review this decision and can choose to contact the Welfare Department at a later date.)

For further information please email: QAHE.Welfare@qa.com

BEFORE SUBMITTING YOUR CLAIM YOU NEED TO COMPLETE THIS SECTION

- ☐ I confirm that I have read and understood both the Introductory Notes (at the beginning of this form) and the Mitigating Circumstances - Student Guidance (available at www.londonmet.ac.uk/mitigation).

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 University to take action under its disciplinary procedures.**

Student's Signature: _____ **Date:** _____