

Application to Examining Board for Special Consideration



All applications will be treated in strict confidence.

Special consideration is a post-examination adjustment to a candidate's mark or grade to reflect temporary illness, temporary injury or some other event outside of the candidate's control AT THE TIME OF THE ASSESSMENT, which has had, or is reasonably likely to have had, a material effect on a candidate's ability to take an assessment or demonstrate his or her normal level of attainment in an assessment.

Before completing this form, please carefully read the Guide for Parents on Special Consideration, available on school website. **Where the request for special consideration fails to meet the criteria it will be rejected.**

This form must be completed in full or will not be accepted. Please note form must be signed by candidate and parent/guardian.

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| Candidate Name | |
| Candidate Number | |
| D.O.B. | |
| Details of Disadvantage | |
| Date Problem occurred | |
| Examinations (including dates) for which candidate was disadvantaged | |
| Medical Evidence | Must be attached |

Signed: _____ Parent/Guardian

Signed: _____ Candidate

Date: _____

Please return to the school office, preferably ASAP after the examination affected, together with the doctor's letter and by the deadline of 3pm on Monday 24 June 2024 for Summer series examinations. Please mark for the attention of Mrs Ferguson (Examinations Officer). Incomplete applications or those received after this date, will not be accepted.