Evidence-Based Extension / Deferral Request

This form is for students seeking an evidence-based extension or requesting to defer an assessment attempt to the next available opportunity due to being impacted by mitigating circumstances.

If you are requesting an extension prior to your submission date and have not exhausted your automatic extensions, please complete UCEN Manchester Automatic Extension Request Application Form.

All students are entitled to two automatic 7 calendar-day extensions per 120 credit level of study in any one academic year. All extensions are calculated from the original submission date.

Information can be found in UCEN Manchester's Extensions and Mitigating Circumstances Policy and Procedure If you require further guidance, please see your Personal Tutor or see a member of the Future U Team.

Step 1. Please fill in your Personal Details below. Please circle where appropriate.

Name:	UCEN Manchester ID:	
Course Title and Level:	Contact Number:	
Attendance:	Full Time	Part Time
Do you have a Personal Learning Plan?	Yes	No
Is your claim related to the condition outlined in your PLP?	Yes	No
If your claim relates to the conditions outlined in your PLP, have you spoken to your Departmental Disability Co-Ordinator before submitting this claim form?	Yes	No
Do you give us your consent to contact the Disability Service to discuss this further?	Yes	No

Step 2 - What are you applying for? **Please choose one of the following:**

I need an evidence-based extension (7 calendar days) for a piece of work.	
I cannot complete/attend the assessment. I want to defer it to a later date.	

Step 3 - What pieces of work does this apply to?

Module Title	Assessment Title	Assessment Weighting	Assessment Type *(CW/PR/EX)	Original Submission Date

* The following types of assessments are exempt from automatic extension: presentation, group work, and examinations (exclusions to this rule will be stated in module handbook).

Step 4 - Please tell us your circumstances by including a supporting statement.

It is essential that you describe the full nature of circumstances affecting you.
What has happened
What impact has it had on you personally
How it has impacted your performance in the assessment(s)

Explain how the circumstances affected your performance in the assessment(s) identified (e.g. time was lost, concentration was affected, a task could not be completed, etc.)

STEP 4 - Details of Mitigation Please describe fully the nature of the circumstances. Explain how the circumstances affected your ability in the assessment(s) identified above (e.g. time was lost, concentration was affected, a task could not be completed, etc) If the circumstances affected more than one unit or element of assessment, identify clearly how each unit/element of assessment was specifically affected.
Enter text here

Step 5 - Include evidence that supports your case.
It is essential that evidence is included to support your request; e.g. if you are submitting on the grounds of a medical condition then evidence of the condition will be necessary.

Please note that if you are unable to provide evidence at the time of submitting your claim, you should include details of when this will be available. In all cases, the form and evidence should be submitted within 5 calendar days of the submission date, only in exceptional circumstances will this timeframe be extended.

Step 5 - Include evidence that supports your case. Please list below the documentary evidence you are submitting with this form:

Step 6 - Contribution by members of staff (optional).

If you feel that a specific member of staff can contribute to your request, then you can ask them to provide you with a supporting statement.
Message to staff - If a student has discussed their mitigation circumstances with you and has asked you to comment in writing, and if you have sufficient knowledge to help evidence this request, please provide a signed statement to be included with the form. A printed e-mail is also acceptable.

Step 7 –Submitting the application

The application form should be submitted to MC@ucenmanchester.ac.uk. By submitting this form, you confirm that the information provided is accurate and complete to the best of your knowledge. The date on which the email is received will be recorded as the official submission date.

(a) ***Confidentiality***
In accordance with the Data Protection Act 1998, we are required to gain your consent to the following: -

- *To hold some elements of the information you have provided on an electronic database;*
- *To disclose the information that you have provided to authorized members of the University staff as required for the reasonable purposes connected with the investigation in the case of an Appeal or Complaint.*

By signing above, you confirm that you agree with the above statements and indicate your consent for the information provided to be used as detailed above and that you have read and understood the procedures for the submission of mitigating circumstances.

(b) ***False Claims***
You should note that the submission of a false claim or fraudulent documentation is a serious matter and is an academic offence. UCEN Manchester reserves the right to check on the validity of the document(s) submitted by contacting the third party directly.