

Centre Name:	
Learner Name:	
Unique Learner Number:	
RAC Run ID:	
Qualification registered on:	
Date and time of assessment special consideration applied for:	
Unit(s) special consideration applied for:	

Provide details of circumstances affecting performance in assessment:

Provide details of supporting evidence (may include medical or psychological evidence, statement from the invigilator / verifier):

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Provide details of the suggested considerations:

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You should complete and submit this form for each learner requesting special consideration with supporting evidence to your allocated Quality Reviewer as soon as possible.

We will consider your application and give you a decision **within 14 days**. We will inform you if we will be unable to reach a decision in this timescale.

Declaration (to be completed by the Head of Centre):

I confirm that the information provided above is accurate.

Head of Centre name:			
Signature:			
Date:		Phone Number:	

For use by AIM Awards:		
<i>Application Received:</i>	<i>Application acknowledged:</i>	<i>Application agreed</i>

Mercurius Politicus.

Awarding Body

Request for Special Consideration Form

<i>Further action:</i>		