|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please read the guidance notes on page 4 before completing this form.**  Keep a copy of this form for your records. All correspondence relating to this claim will be sent to your South Essex College (SEC) emailaddress so please make sure that you check it regularly.  Your claim must be submitted to [heextcircs@southessex.ac.uk](mailto:heextcircs@southessex.ac.uk) with complete supporting evidence within **two weeks** of the circumstance commencing and two week before the Exam Board meeting.  Receipt of this form will be acknowledged by email to your College email account. Key dates are provided in the HE Assessment Year planner. You should submit your work by the agreed deadline wherever possible. If, as a result of the extenuating circumstances (EC), you are unable to meet the deadline, you should submit the work as soon as you can return to college.  The HE Support Office at [hesupport@southessex.ac.uk](mailto:hesupport@southessex.ac.uk) or 01702 220475/220696 can provide advice and guidance on ECs and help you to fill out your claim. | | | | | | | | | | | |
| **Part A - Student Details:** | | | | | | | | | | | |
| 1 | Student ID number: | | | | | Course: | | | | | |
|  | Name: | | | | | Year of Study: | | | | | |
|  | SEC Email Address: | | | | | Programme Leader: | | | | | |
|  | Contact Telephone: | | | | |  | | | | | |
| **Part B – Claim Details:** | | | | | | | | | | | |
| 2 | **Please state all units and assignments that have been affected:** | | | | | | | | | | |
|  | Unit Title(s): | | | | | Unit Code(s) *(see your course /unit handbook)*: | | | | | |
|  | Assignment(s): | | | | | Assignment Deadline(s): | | | | | |
| 3 | **Nature of the EC (Please Tick):** | | | | | | | | | | |
|  | Serious Medical Condition | | Bereavement | Trauma | | Caring Responsibilities | | Court Attendance | | Other | |
| 4 | **Date(s) of the EC:** | | | **From:** dd/mm/yyyy | | | | **To:** dd/mm/yyyy | | | |
| 5 | **Description of the Extenuating Circumstances:** | | | | | | | | | | |
|  | *Continue on a separate sheet if necessary.* | | | | | | | | | | |
| 6 | **How have these circumstances affected the assessment(s) listed above? Please include exact dates.** | | | | | | | | | | |
|  | *Continue on a separate sheet if necessary.* | | | | | | | | | | |
| 7 | **What supporting evidence is attached to this form?** | | | | | | | | | | |
|  | *Please note:*   * *Forms submitted without formal supporting documentary evidence will not be considered.* * *Evidence must be in* ***English****. If you have any difficulties obtaining a translation, please contact your* [*hesupport@southessex.ac.uk*](mailto:hesupport@southessex.ac.uk) *or telephone 01702 220696/220475 for guidance.* | | | | | | | | | | |
| **Part C - Disabilities and Long Term Medical Conditions:** | | | | | | | | | | | |
| 8 | **Do you have a disability or long term medical condition?** | | | | | | | | **Yes/ No** | | |
|  | If you have a disability or long term medical condition, staff at HE Support Office can provide advice, guidance and support. If you would like to disclose a disability to the College please contact [hesupport@southessex.ac.uk](mailto:hesupport@southessex.ac.uk) or telephone 01702 220696/220475. | | | | | | | | | | |
| 9 | **If you have a disability, are you happy for the Extenuating Circumstances Panel to contact the Support Services team for information about your condition?** | | | | | | | | **Yes/ No** | | |
|  | The HE Support Office will not normally pass information about your condition to a third party, including the EC Panel, without your consent. However it will help us to process your EC claim more effectively if we can contact them to find out more about your condition and any special arrangements that have been put in place for you. If you *are* happy for the EC Panel to speak to the HE Support Office Team, please let us know. This information will remain confidential to the EC Panel and will not be made available to your tutors or other course staff. | | | | | | | | | | |
| **Part D – Checklist and Student Signature** | | | | | | | | | | | |
| 10 | **Please check the following questions before you sign and date the form:** | | | | | | | | | | |
|  | * Have you completed all sections of the form? | | | | | | | | **Yes/ No** | | |
|  | * Have you clearly indicated which units and assignments have been affected by the EC? (You might need to check your programme handbook to find the exact unit title/ code). | | | | | | | | **Yes/ No** | | |
|  | * Have you given clear details of the dates that have been affected by the EC? | | | | | | | | **Yes/ No** | | |
|  | * Have you attached appropriate supporting evidence? | | | | | | | | **Yes/ No** | | |
| 11 | **Student Signature:** | | | | | | **Date:** | | | | |
| **Please scan and email this form and supporting documentation to** [**heextcirc@southessex.ac.uk**](mailto:heextcirc@southessex.ac.uk) **or post to Head of HE Academic Standards, Validation & Quality, South Essex College, Luker Road, Southend on Sea SS1 IND. Ensure you keep a copy for your records.** | | | | | | | | | | | |
| **PART E - OFFICE USE ONLY** | | | | | | | | | | | |
| **Date Received:** | |  | | | **Date Copied to EC Panel:** | | |  | | | |
| **Received by:** | |  | | | **Date Copied to Exam Board:** | | |  | | | |
| **If the student has a potential disability or long term condition, has the EC Clerk referred them to the Support Services Team?** | | | | | | | | | | | **Yes No** |
| **Category:** | | **A** (Acceptable reason for claim) | | **B** (Reasons for claim that may be considered) | | | | **C** (Unacceptable reasons for claim) | | | |
| **Decision of EC Panel:** | | Validate | | Reject | | | | Evidence Needed | | | |
| **Comments:** | | | | | | | | | | | |
| **EC Panel Chair Signature:** | | | | | | | | **Date:** | | | |

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| **Guidance for Completing this Form** |
| * Please read these guidance notes carefully, making sure you consult the table on pages 5 & 6 before completing your form. * You can also visit the College website for more information: <http://www.southessex.ac.uk/higher-education/higher-education-policies> * All correspondence relating to this claim will be sent to your registered College email address. Please make sure that you check it regularly.   **Please scan and email this form and supporting documentation (refer to the Extenuating Circumstances Policy) to** [HEextcircs@southessex.ac.uk](mailto:HEextcircs@southessex.ac.uk) **or post to Head of HE Academic Standards, Validation & Quality, South Essex College, Luker Road, Southend on Sea SS1 1ND. Keep a copy for your records.** |
| **Help and Support** |
| We recommend that you contact HE Support Office at [hesupport@southessex.ac.uk](mailto:hesupport@southessex.ac.uk) or call 01702 220475/220696 if you have any queries regarding your EC claim or if you have any difficulties completing the form: |
| **What are Extenuating Circumstances?** |
| Extenuating Circumstances (ECs) are defined as circumstances which are unexpected, significantly disruptive and beyond your control, and which may have affected your academic performance.  Planning, time management and the meeting of deadlines are part of the personal and professional skills expected of all students. For this reason and to be fair to all students, **no extensions beyond notified submission deadlines are allowed**, unless you have an **agreed prior arrangement** in relation to the published guidelines on disability.  However, there may on occasion be exceptional circumstances that might affect your ability to meet an assessment deadline or affect the level of your performance at assessment. If you are having difficulties, you may be able to submit an Extenuating Circumstances claim. |
| **Acceptable Grounds for Extenuating Circumstances** |
| UAL has three EC categories, A, B and C. These are explained in the table on page 5 of these notes which gives guidance on what is included under each category and the type of evidence needed to support a claim. The categories are: Category A: Acceptable reason for claim Reasons that will normally be considered as acceptable, where supported by appropriate evidence. Category B: Reasons for claim that may be considered Reasons that may be considered as acceptable, where supported by appropriate evidence. Category C: Unacceptable reasons for claim Reasons that would not normally be accepted. |
| **What to do if you think Extenuating Circumstances have affected your work** |
| 1. Download the form from the College website: <http://www.southessex.ac.uk/higher-education/higher-education-policies>If you require assistance to access the form contact the HE Support Office: Email [hesupport@southessex.ac.uk](mailto:hesupport@southessex.ac.uk) or call 01702 220475/220696. 2. Complete the form in full, clearly stating the facts of the circumstances that have affected your work for assessment. 3. Make sure you attach relevant formal evidence and documents (medical certificates etc.) to support your case. Evidence should be in **English** – any translations will have to be verified and could delay the processing of your claim. 4. Be realistic - short illnesses such as a cold or routine IT or transport problems are not considered grounds for ECs. Consult the EC Categories table on page 5 before completing the form. 5. Be specific. State the dates your performance was affected and why. Indicate specific units or assignments or projects. Tell us what impact the EC has had on your performance at assessment. 6. Seek help. If you are not sure whether or when to submit a claim you should consult the HE Support Office (contact details on the front of this form). 7. Submitting a form with a genuine case will not guarantee you a pass or a better assessment outcome, but it may help in some cases. |
| **Submitting your Form** |
| 1. Please scan and email your completed form to [heextcircs@southessex.ac.uk](mailto:heextcircs@southessex.ac.uk) or post to Head of HE Academic Standards, Validation & Quality, South Essex College, Luker Road, Southend on Sea SS1 1ND. 2. If this is not possible you should ask your Programme Leader to submit it on your behalf. Your submission will be recorded and acknowledged by email to your College email account. 3. If you wish the contents of your submission to be treated in the utmost confidence, you can mark the envelope for the attention of the Chair of the EC Panel in a sealed envelope clearly marked ‘Extenuating Circumstances’. This will ensure that the contents of your form will remain confidential to the Chair of the EC Panel and Chair of the Exam Board (usually the Dean) and appropriate clerks. This will ensure that the contents of your form will remain confidential to them. 4. Your form and supporting evidence should be submitted as close as possible to the time the circumstance takes place, and **at the latest within two weeks of it commencing AND two weeks before the Exam Board meeting**. Claims received after the submission point for the unit/ project will be automatically rejected, unless the circumstance coincides with the assessment submission point. 5. ECs relating to late submissions will not be accepted without confirmation that the work has been submitted from the Programme Leader. You should submit the work at the earliest opportunity on your return to College. The dates of your claim will be checked to verify that you were unable to submit the work sooner. 6. **Keep a copy of your submitted form for your own records.** |
| **What Happens Next?** |
| If your claim is supported by appropriate evidence, it will be considered by the College EC Panel. The Panel will establish whether your claim meets the University criteria and you will receive notification of whether the claim has been validated or rejected. A final decision will be made on the impact of your ECs when your assessment profile is discussed at the Exam Board. |

| **Reason for EC Claim:** |  | **Category A:**  Acceptable reason | **Category A:**  Evidence required |  | **Category B:**  Reasons that may be considered | **Category B:**  Evidence required |  | **Category C:**  Unacceptable reason |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Serious Medical Condition** |  | * Serious personal injury or medical condition preventing attendance or completion of assessment or submission of work | * Written evidence from a registered medical practitioner |  | * Serious injury or illness to child, partner or close relative (parent) * Serious worsening or acute episode of an ongoing medical condition or disability | * Written evidence of impact to claimant from registered medical practitioner |  | * Ongoing medical conditions, disabilities, learning difficulties or mental health conditions * Minor illnesses or injuries (such as colds, headaches, hayfever) |
| **Bereavement** |  | * Death of parent, (including step-parents and legal guardian) child, siblings, spouses or common law partners. | * Written evidence from a professional such as Undertaker, Coroner or Registrar OR * Death Certificate |  | * Death of close relative (not identified in Category A) or friend | * Evidence identified in Category A AND * Written evidence of impact to claimant from registered medical practitioner |  |  |
| **Trauma** |  | * Victim of serious crime (e.g. rape, assault, mugging) * Theft of work required for assessment * Direct experience of terrorist incident or natural disaster * Major fire in residence | * Written corroboration of reported crime from Police or other investigating authority * Written evidence from registered medical practitioner, Police, Fire service or College Department (Estates) |  | * Family breakdown (such as divorce) | * Evidence from Solicitor AND/OR * Written evidence of impact to claimant from registered medical practitioner |  | * Minor crime * Financial problems or employment difficulties * Accommodation problems or house moves * General domestic / family problems * Assessment Exam stress |
| **Reason for EC Claim:** |  | **Category A:**  Acceptable reason | **Category A:**  Evidence required |  | **Category B:**  Reasons that may be considered | **Category B:**  Evidence required |  | **Category C:**  Unacceptable reason |
| **Caring Responsibilities** |  |  |  |  | * Unexpected caring responsibilities caused by sudden serious illness or worsening of ongoing medical condition to child, partner or close relative | * Written evidence from patient’s registered medical practitioner AND * Written evidence of impact to claimant from registered medical practitioner |  | * Ongoing caring responsibilities * Caring responsibilities for minor illnesses, accidents or injuries |
| **Court Attendance** |  | * Jury Service or attendance at court or tribunal as a witness, defendant or plaintiff | * Official correspondence from Court or Tribunal Authority |  |  |  |  | * Supporting friend or relative at Court or Tribunal |
| **Miscellaneous** |  |  |  |  | * Serious disruption caused by terrorist incident or natural disaster | * Evidence of serious disruption to travel or other plans preventing attendance at or completion of assessment or submission of work AND/OR * Written evidence of impact to claimant from registered medical practitioner |  | * Any circumstances which have not clearly impacted on academic performance or do not clearly relate to the timing of the assessment * Visa problems * Failing of IT equipment * Minor private or public transport failure, holidays or booked travel arrangements |