

Mitigating circumstances notification form

This form can be completed by applicants who feel that they have experienced exceptional mitigating circumstances, which have impacted their ability to meet the conditions of offer, as laid down by the University. Please read the information on our website and in our Admissions Policy before completing the form. All sections of the form must be completed and the form can only be submitted with the full knowledge / consent of the applicant. All communications regarding this matter will be directly with the applicant.

First name:	Surname:
UCAS personal identification number or NTU ID nur If you don't have access to either of the above, plea birth here.	mber: use ensure that you provide your full name above and enter your date of
Please list all the courses you have applied for:	
Please tell us about the circumstances you wish to m	
Please use the continuation sheet on page 4 or atta name / date of birth at the top of each sheet.	ch additional sheets ensuring you state your NTU ID, UCAS Personal ID or

What dates are applicable to your circumstances?			
Where applicable provide an end date, expected end date or state 'ongoing':			
If your mitigating circumstances relate to a specific time period, you must include a start and end date (dd/mm/yy). If the circumstances relate to one specific date but the effects are on-going, please indicate the start date and explain further in the on-going section.			
Start date (dd/mm/yy)	End date (dd/mm/yy)	On-going	
How do you fool those si	rcumstances have affected yo	our ctudios?	
	_		
		ease state which qualifications or assessments were affected.	
If you feel your circumstance	es have had a wider impact on you	ur education please explain now:	
		rovide the email, name and telephone contact details of someone at your	
		m to discuss the impact of your circumstances on your education. We	
may also discuss with th	em your potential to succeed	if these circumstances had not arisen.	

Please confirm whether you have already received any adjustments to support you through these circumstances, and whether you have requested special consideration through an Awarding Body.
Please provide supporting evidence:
☐ Medical certificate or letter from doctor / consultant / specialist
Official confirmation in the form of a report or letter from someone who knows you in a professional capacity (eg. police officer, social worker, teacher, etc.)
Death certificate (if available)
☐ Other (please specify):
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Declaration By submitting this request for mitigating circumstances you are agreeing for the University to discuss your situation with the nominated School contact supplied above (if applicable). Your information will also be shared with the members of the Mitigating Circumstances Panel, in order for them to consider your case, and may also be shared with our Student Support Services and such other colleagues as may be necessary if the panel deems that the nature of your circumstances may transition with you to University.
For further information about how your data will be used and stored visit www.ntu.ac.uk/privacystatement.
Signature: Date:
If you're attaching further sheets as evidence alongside this form, please ensure that your NTU ID, UCAS Personal ID or name / date of birth are clearly marked at the top of each sheet.
Once complete, please scan and return this form via email to rmcadm@ntu.ac.uk or by post to:
Admissions Nottingham Trent University 50 Shakespeare Street Nottingham NG1 4F0

Continuation Sheet