**APPLICATION FORM FOR AN EXAMINATION ALLOWANCE**

Before completing this application form you should read the Notes for Guidance here: <http://www.student-registry.admin.cam.ac.uk/about-us/applications-committee>

You may also wish to refer to the relevant Statutes and Ordinances at: <http://www.admin.cam.ac.uk/univ/so/2016/chapter03-section2.html>

**Student details. All fields are compulsory**

|  |  |  |  |
| --- | --- | --- | --- |
| USN |  |  |  |
| Surname |  | | |
| First name (s) |  | | |
| College |  | | |

**Student’s record to date**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Academical year** | **Tripos & Part e.g. MAT0** | **Terms kept** | | | **Result** |
| **M** | **L** | **E** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Please indicate what is being applied for.**

**The Guidance Notes offer further details of each allowance.**

|  |  |
| --- | --- |
| **DDH – Declared to have deserved Honours** |  |
| **Allow the Examination** |  |
| **Put in Standing** |  |
| **Ordinary BA Degree (for Part II students only)** |  |
| **Invite the Board of Examiners to reconsider its original result** |  |

|  |  |
| --- | --- |
| **Leave to disregard terms\*** |  |
| **Date student went out of residence** |  |
| **Proposed date / term for student’s return** |  |
| **Is the student proposing to return to the same Tripos?** | Y / N |

\*In instances where a student’s supervision is a departmental responsibility or when a return in either a Lent or an Easter Term is proposed, the College should check with the department that the application is academically feasible

|  |
| --- |
| **If resumption after a period of disregarded terms is subject to College conditions in addition to satisfactory evidence (e.g. a College test), please indicate those conditions here:** |

|  |  |
| --- | --- |
| **Resume study** |  |

Where the Committee and / or the College attached conditions for resumption of study, evidence of those conditions having been met is required before the student intends to return.

A student may not resume study without the permission of the Committee.

**Checklist**

**This application must be accompanied by ALL the relevant information specified below. Forms without this information will be returned to the college by the Secretary to the Committee which may result in a delay in the case being considered.**

|  |  |
| --- | --- |
| A letter from the Tutor, setting out the case for the application.  For a request to disregard terms, please specify what the student will do on return. |  |
| Medical evidence.  Please note that the requirement is evidence, not merely a declaration that the student was ill |  |
| A completed student declaration form, confirming the student’s consent for the medical evidence to be submitted and made available as indicated on the form. |  |
| Supervision reports for the academical year(s) in question.  Where an application concerns an undivided two-year Part I, supervision reports for both years should be submitted. (Not required for resume study). |  |
| All available exam marks for the relevant examination and the marking and classing criteria where available. (Not required for resume study). |  |

|  |  |
| --- | --- |
| Tutor |  |
| Tutor’s email |  |
| Tutor’s signature |  |
| Date |  |

|  |  |
| --- | --- |
| The college supports this application | Yes / No |
| If no, the college have explained this to the student | Yes / No |
| The student is aware of the full contents of this application | Yes / No |

|  |  |
| --- | --- |
| Senior Tutor’s signature |  |
| Date |  |