APPLICATION FOR INDIVIDUAL EXAM ARRANGEMENTS

Family Name: __________________________ First name: __________________________
PRID No: __________________________ Year of Study: Foundation /1 /2 /3 /4

Degree Course: __________________________

Location of Study: Colchester Campus: [ ] Loughton Campus: [ ] Southend Campus: [ ]

What is your condition? ____________________________________________________________

Is this condition: persistent / likely to change (delete appropriately)

Have you had arrangements for examinations in the past?

Extra Time [ ] How much per hour________________________

Alternative Location [ ] Please give details ________________________

Paper in Alternative Format [ ] Please give details ________________________

Use of computer [ ] Scribe [ ] Please give details ________________________

Other (give details) _____________________________________________________________

What examinations were these?________________ Were arrangements appropriate? Yes / No

If you have not had arrangements in the past a member of our service will be able to advise
you and make recommendations.

DECLARATION

▪ I declare that the information I have given on this form is correct and complete to the best of my knowledge, and I understand that giving false information will disqualify my application.

▪ The University has a notification under the 2018 Data Protection Act and the personal data supplied on this form will be held in accordance with the requirements of the Act. The data will be held solely for the purposes of assessing your need for individual exam arrangements. Details will be passed to the Examinations Office in order for them to put the arrangements in place, and to departments where they organise internal exams.

▪ I give my consent to the University holding the personal data on this form for the purposes of assessing my need for individual exam arrangements, and to sharing information with the exams office, department and invigilator where it might be useful in an emergency.

Signed __________________________ Date __________________________

Please return this form to: The Student Wellbeing and Inclusivity Service (SWIS) or Student Services Hub at your campus. Email queries please contact: disa@essex.ac.uk

Deadlines for applications:
For December/January examinations: no later than 31 OCTOBER
For May/June examinations: no later than 31 JANUARY

You must supply evidence of eligibility if you have not already done so.

There is no need to reapply each year unless you start a new course.
FOR OFFICE USE ONLY – tick or circle relevant information

Reason for arrangements: ___________________________ Condition type: PERM / TEMP

Viable each year: Yes / No Evidence: Ed Psych / consultant / doctor / A of N / Sp teacher

Student seen: Yes / No Recommended by: ___________________________

INDIVIDUAL NEEDS SCREEN:

Extra Writing time (mins per hour) ___________________________

Extra non writing time (mins per exam) ___________________________

Amanuensis: [ ] Needs computer: [ ] Software needed

Hardware needed: ___________________________

Student’s own laptop: ___________________________

Special Paper: Electronic or Braille or Large Font (size) Script Note: Dyslexia/SpLD or Scribe

Other notes for exams office or invigilator: ___________________________

(standard SpLD) Supplementary booklet required for planning [ ]

Tick appropriately

Scheduling: [ ] None consec days [ ] One exam per day [ ] Religious grds

Location: [ ] Sit near door [ ] Not main exam hall [ ] PC Lab [ ] Single Room

Furniture: [ ] Cushion [ ] Footstool [ ] Large Desk [ ] Typist chair [ ] Wheelchair access

CMIS Category (circle one category):

<table>
<thead>
<tr>
<th>Code</th>
<th>Location</th>
<th>Time</th>
<th>Main Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>SO</td>
<td>Single Office</td>
<td>Any</td>
<td>All single office requests – time options and additional info flagged in boxes and notes. Includes PC in a single office. Includes wheelchair user in SO.</td>
</tr>
<tr>
<td>SC</td>
<td>Single Office</td>
<td>Any</td>
<td>Scribe or Reader - time options and additional info flagged on MIS. Please specify if Reader only</td>
</tr>
<tr>
<td>PCX</td>
<td>PC Lab</td>
<td>PC + EWT</td>
<td>PC with extra writing time (+15m ph)</td>
</tr>
<tr>
<td>PC</td>
<td>PC Lab</td>
<td>PC + Normal time</td>
<td>PC Normal Time</td>
</tr>
<tr>
<td>PC</td>
<td>PC Lab</td>
<td>PC + ENWT</td>
<td>PC + extra non writing time (up to 30m per exam)</td>
</tr>
<tr>
<td>XT</td>
<td>Not Main Exam Hall</td>
<td>EWT</td>
<td>Extra writing time (+15m ph)</td>
</tr>
<tr>
<td>XNW</td>
<td>Not Main Exam Hall</td>
<td>ENWT only</td>
<td>Extra non writing time (+30m per exam)</td>
</tr>
<tr>
<td>EX</td>
<td>Not Main Exam Hall</td>
<td>normal time + 50% EWT or/and 50% ENWT</td>
<td>Extra writing time (+50% ph) (usually only visually impaired)</td>
</tr>
<tr>
<td>OTH</td>
<td>Not Main Exam Hall Or Main Exam Hall</td>
<td>Any</td>
<td>Mobility/access difficulties, not in any of the above categories, just furniture or scheduling required. Or just notes to the invigilator</td>
</tr>
</tbody>
</table>

Advice to invigilator:

Student has a hearing impairment and may not know when to stop writing or hear any instructions given verbally about the paper. Invigilators should be aware that they need to check that the student has heard and not accuse him/her of cheating if he/she does not stop writing.

Student may need to stand, stretch and move around during rest breaks.

Urgent access to the toilet may also be required (inc. during the beginning and end period of examination - the normal bar should not apply).

Student has permission to bring food and drink into the examination.

Other: