

## Appendix B: Mitigating Circumstances Claim Form

**To be used by all HYMS students, including undergraduate, postgraduate and MB BS**

**IMPORTANT:** Please read the HYMS Policy on Mitigating Circumstances carefully before completing this form. If you need help with completing this form, you should seek guidance from the HYMS Student Support Office ([student.support@hyms.ac.uk](mailto:student.support@hyms.ac.uk)). If you are requesting an extension, the completed form should be submitted to HYMS before the published deadline for the submission of the assessment(s). All other claims must be submitted by the HYMS' published deadline. If you submit this form by email, you *must* use your HYMS email address.

You are encouraged to submit mitigating circumstances before the assessment deadline. If you wish to submit mitigating circumstances after the assessment deadline, you must submit your claim within seven days after the deadline.

Section 1: Student Details	
Full name	
Degree registered	
Registration start date	
Current year of study	
Mode of Study	Full time Part time (Delete as appropriate)
Have you read the HYMS Mitigating Circumstances Policy and sought guidance from Student Support Office?	Yes No (Delete as appropriate)

Section 2: Extension to submission deadline of summative assessment	
Only complete this section if you are requesting an extension to the submission deadline.	
How many days have your mitigating circumstances prevented you from working on your assessments?	
How many days are you requesting the deadline to be extended?	

**Section 3: Details of your mitigating circumstances**

You may continue on a separate sheet if necessary.

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**Section 4: List of supporting evidence submitted**

Claims without satisfactory evidence will not normally be considered. A certified translation of any documents should be provided where appropriate. If you are unable to supply evidence with this form, please state the reason for this and the evidence you will be providing and the date at which it will be available.

<u>List of evidence</u>	<u>Source (e.g. GP, hospital consultant)</u>

### Section 5: Details of assessments affected

Module/Course/Exam	Mode of assessment (e.g. exam/essay)	Date of exam / normal deadline for submission	Did you sit the exam / submit the assessment?

### Section 6: Student declaration

I declare that the information that I give on this form and include in attachments is true and all the evidence submitted is genuine. I understand that providing false information is considered a disciplinary offence by HYMS. I have read the HYMS Policy on Mitigating Circumstances available at: <http://www.hyms.ac.uk/about-us/regulations-policies-and-codes-of-practice/policies>

I am aware that in order to consider and administer/process any case, the information which I have provided will be made available to the appropriate administrative and academic staff including members of the Mitigating Circumstances Sub-Committee. I accept that my claim whilst confidential cannot be anonymous.

#### Signature

(please type your full name in the signature box for electronic submission)

Date

**Please return completed forms with your supporting documentation in one of the following ways:**

- electronically to the [mitigating.circumstances@hyms.ac.uk](mailto:mitigating.circumstances@hyms.ac.uk)
- by post: **FAO Secretary of Mitigating Circumstances Sub-Committee, HYMS, Hertford Building, University of Hull HU6 7RX**
- To one of the HYMS reception desks "FAO Secretary of Mitigating Circumstances Committee"

**OFFICE USE ONLY**

**Section 7: HYMS Receipt by Secretary of Mitigating Circumstances Sub-Committee**

<b>Date of receipt</b>	
<b>Is the form completed accurately and appropriate level of supporting documentation provided?</b>	<b>Yes</b> <b>No (if no, specify advice provided to the student):</b>
<b>Date of submission to the MCC</b>	

**Section 8: Mitigating Circumstances Sub-Committee's Decision (complete this section as record of electronic meeting)**

<b>Claim</b>					
<b>Please state reasons below:</b>					
<b>Please specify if the student should be referred to the HYMS Student Support Office for pastoral support:</b>					
<b>As the Chair (or deputy) of the HYMS Mitigating Circumstances Sub-Committee (MCC), I confirm that the decision made by the MCC follows the HYMS Mitigating Circumstances Policy and Terms of the Reference of the MCC.</b>					
<b>Signature</b> (please type your full name in the signature box for electronic submission)		<b>Name</b>		<b>Date</b>	

**Section 9: Ratification by the relevant HYMS Board of Examiners (complete this section as record of Chair's Action/electronic meeting)**

<b>Board of Examiners</b>						
<b>Assessment / examination arrangement in light of the decision of MCC</b>						
<b>Please comment if the student requires Leave of Absence as a result of the decision of MCC and above arrangement</b>						
<b>As the Chair (or deputy) of the above Board of Examiners, I ratify the decision made by the MCC and provided the above assessment / examination arrangement in light of the decision by the MCC.</b>						
<b>Signature</b> (please type your full name in the signature box for electronic submission)	<table border="1"> <tr> <td></td> <td><b>Name</b></td> <td></td> <td><b>Date</b></td> <td></td> </tr> </table>		<b>Name</b>		<b>Date</b>	
	<b>Name</b>		<b>Date</b>			

<b>OFFICE USE ONLY</b>	
From processed by (staff name)	
Date of MCC decision made	
Date of Board of Examiners' ratification	
Date of informing the Board of Studies	
Date of informing the student	
Date of informing the Universities' Registry Services	
Date of HAPI record updated	