** Application for Adjustments to**

**Assessment Arrangements**

**(Research Students)**

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| ***Staff notice:*** *This form contains personal data and may contain sensitive information. Please ensure that downloaded or printed copies are stored securely. Please retain information only for as long as you need it and then dispose of it confidentially. Further advice about handling student data can be found here: (*[*https://academic.admin.ox.ac.uk/student-data*](https://academic.admin.ox.ac.uk/student-data)*).**Students should complete this form for submission under Section 6 of the General Regulations for Research Degrees[[1]](#footnote-2) in the* Examination Regulations *for candidates who require adjustments to the assessment arrangements for their Transfer of Status, Confirmation of Status, and the final oral examination.**Please discuss your needs with your Director of Graduate Studies, or supervisor should you prefer, prior to submitting this form.* |

**SECTION 1 –** Declaration of consent *(to be signed by the student)*

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| I understand that the information and any materials that I supply in support of this application will be processed by the University in accordance with the Student Privacy Policy <https://compliance.admin.ox.ac.uk/student-privacy-policy>. I consent to my information being used for the purposes of this application. |
| **I consent to disclosure within the above limits** |                       ❑   **Yes**           ❑   **No** |
| **Signature of Student:** |  |

**SECTION 2 -** Student details

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| --- | --- |
| Name of college: |  |
| Surname: |  | Student Number: |  |
| Forename(s): |  | Current year of study: |  |
| Programme of study: |  |
| Name of supervisor(s): |  |

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| **Do you already have some approved assessment adjustments in place?** **I*f yes****, please indicate briefly what they are below:* |         ❑   **Yes**           ❑   **No** |
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**SECTION 3 -** Application for assessment adjustments

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| **Please indicate what assessment adjustments you require:***Please note that you should discuss your requirements with your Director of Graduate Studies or, should you prefer, your supervisor or graduate studies administrator to ensure they are workable prior to completing this section of the form.* *You must provide appropriate supporting evidence for your request.*  |
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| **Please list any supporting evidence that you are including with your application.** *Please note that this evidence will not be sent to your examiners.* |
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**SECTION 4 -** Signature of Director of Graduate Studies (or equivalent)

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| **Have the requested assessment arrangements been approved/part-approved? If yes, please provide details.** | ❑   **Yes**    ❑   **Part**     ❑   **No** |
|  |
| **If no, is this because you are not satisfied that the evidence supports the request?** **Please briefly indicate why.** |
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| **If no, is this because the assessment adjustment requested is one that must be approved by the Proctors? Please briefly indicate why.** (The Departmental Administrator should pass the application to the Proctors)      |
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| **Signature of Director of Graduate Studies:**  (an electronic signature is acceptable) |  |
| **Date:** |  |

**Please send your completed form to your Departmental Graduate Administrator**

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**OFFICE USE ONLY**❑ Research Degrees Team notified (researchdegrees@admin.ox.ac.uk)

1. <http://www.admin.ox.ac.uk/examregs/2016-17/grgoveresedegr/> [↑](#footnote-ref-2)