Extenuating circumstances notification

Applicants should refer to the guidance on our website (www.bristol.ac.uk/applicants/applicants/extenuating-circumstances) prior to completing the form in black ink or type.

Both parts of the form must be completed before submission. We may request additional information where necessary.

Part 1 (To be completed by the applicant)

Personal details
Surname: ___________________________ UCAS ID or CAID: ___________________________
First name(s): ___________________________ Date of birth (DD/MM/YYYY): ___________________________
Course code(s): ___________________________

Please list all the courses to which you have applied at the University of Bristol.

Nature of extenuating circumstances

☐ Illness ☐ Main carer for another
☐ Social/Personal/Domestic ☐ Bereavement
☐ Teaching issues ☐ Other: ___________________________

Have the relevant exam boards been notified of these circumstances? Or if not, will they be? YES / NO

Applicant statement Please use this section to tell us more about the circumstances you wish us to consider. If possible please include specific dates/timings of events. Please attach a separate statement if you require more space.

Applicant declaration

I confirm that the above statement is a complete and accurate record and that no relevant information has been knowingly omitted. I give my consent to the storage and use of this information by the University of Bristol.*

Signature: ___________________________ Date: ___________________________
All forms must be accompanied by a statement from a relevant third party corroborating the information in the applicant statement. This can either be provided in the section below or attached as a separate document.

**Medical or other evidence attached?** *Please briefly outline what documents are attached.*

If no additional documents are attached the following section **must** be completed.

**Part 2 (To be completed by a relevant third party)**

Relationship to applicant: ________________________________

**Supporting statement** *Please include all relevant information and if possible include specific dates/timings of events to corroborate the applicant’s circumstances.*

**Supporting declaration**

I confirm that the above statement is a complete and accurate record and that no relevant information has been knowingly omitted. I also give my consent to the storage and use of this information by the University of Bristol*.

Signature: __________________________ Date: __________________________

Once fully completed, please return the form and any additional documents to **ug-admissions@bristol.ac.uk** or send by fax to +44 (0)117 331 7391, or by post to:

Undergraduate Admissions Office, University of Bristol, Senate House, Tyndall Avenue, Bristol, BS8 1TH, UK

*All personal information supplied on this form will be held in accordance with the Data Protection Act 1998*