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)

<table>
<thead>
<tr>
<th>Personal details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname:</td>
</tr>
<tr>
<td>First name(s):</td>
</tr>
<tr>
<td>Course Title(s) and Code(s):</td>
</tr>
</tbody>
</table>

Please list the qualifications/examinations which have been, or are likely to be affected e.g. GCSEs, A levels:

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.

All medical circumstances must be accompanied by a statement from a medical professional.

All documents and statements must be in English or include a certified translation.

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:

Print Name:

Once fully completed, please return the form and any additional documents to Choosebristol-ug@bristol.ac.uk or send by post to:

Undergraduate Admissions Office, University of Bristol, 31 Great George Street, Bristol, BS1 5QD

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