| Please keep a copy of this form for your records. All correspondence relating to this claim will be sent to your registered **College email address** so please make sure that you check it regularly.  Please submit your completed form to your College Administration Office email address:  [circumstanceclaims@gbmc.ac.uk](mailto:circumstanceclaims@gbmc.ac.uk) | | | | |
| --- | --- | --- | --- | --- |
| **Part A - Student Details:** | | | | |
|  | Student ID number: | Course: | | |
|  | Name: | Stage/Year of Study: | | |
|  | College Email Address: | Course Leader: | | |
|  | Contact Telephone: | Personal Tutor: | | |
| **Part B – Unit Details:** | | | | |
|  | **Please state the unit:** | | | |
|  | Unit Title(s): | | | |
|  | Assignment(s): | Assignment Deadline(s): | | |
| **Part C – Checklist and Student Signature** | | | | |
|  | **Please check the following questions before you sign and date the form:** | | | |
|  | * Have you completed all sections of the form? | | | **Yes/ No** |
|  | * Have you clearly indicated which units and assignments have been claimed (You might need to check your course handbook to find the exact unit title). | | | **Yes/ No** |
|  | * Have you spoken with your Tutor the need for an extension | | | **Yes/ No** |
|  |  | | |  |
|  | **Student Signature:** | | **Date:** | |