| 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  |
| --- |
| **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:**  |