

Application for Special Consideration



iaea
 THE INSTITUTE OF AUTOMOTIVE
 ENGINEER ASSESSORS

Part 1 . To be completed at the exam centre			
Candidate Name		Candidate Number	
Centre Location		Date & Time	
Invigilators			
Exam Title			
Did not sit exam	Yes / No	Sat exam but disadvantaged	Yes / No
Summarise adverse circumstances affecting examination performance			
Date & Time problem began		Is the problem continuing?	Yes / No
Current expert evidence attached	Yes / No		
Part 2. To be completed by the Head Invigilator of the exam session			
Summary of events:			
Declaration: I am satisfied that the information provided is accurate and fully support the application. YES / No *			
*If you are not supporting the application, please ensure your reasoning is included in the summary of events.			
Name (Please print)		Date	
Signature			

Part 3. To be completed by the Education Officer

For incomplete exams, indicate the mark awarded and percentage completed. These results must form the basis of a special consideration award

Mark

Percentage

Summarise investigations carried out.

Decision: I am satisfied that the information provided is accurate and approve the application for an award for special consideration to be added to the exam result. YES / No*

*If the application is rejected, please include your reasoning in the summary of investigations.

Special Consideration Award. Refer to Special Consideration Guidelines.

Name (Please print)

Date

Signature