

Royal Academy of Dance
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SPECIAL CONSIDERATION APPLICATION FORM

Applications for Special Consideration must be submitted on the form below by teachers, parents/guardians or candidates. Applications must be submitted within 5 working days of the examination. It is necessary to submit one form and attach a list where multiple candidates are affected. A letter of acknowledgement will be sent to the person who submitted the form within 3 working days of receipt. The Academy will not enter into discussion with teachers, candidates or parents as to how much special consideration should be applied.

Centre Number		Centre/School Name	
Candidate ID(s)		Candidate Name(s)	
Examination level		Date of examination	
Examiner's name		Country	
Summarise the adverse circumstances affecting the examination and the degree to which you think the candidate has been affected			
Current medical/ psychological evidence is attached (<i>tick one box</i>)	YES	NO	
Date problem/condition began (<i>where appropriate</i>)			
Is problem/condition continuing? (<i>where appropriate – tick one box</i>)	YES	NO	
DECLARATION: I am satisfied that the information provided is accurate and fully support the application.			
NAME (<i>please print</i>) _____			
POSITION (<i>eg Principal, Teacher</i>) _____			
DATE _____ SIGNATURE _____			

The form must then be sent to the Examinations Manager at London Headquarters by post, fax or email, or to the examinations department in the case of Australia, Canada, New Zealand and South Africa.

<i>For office use only</i>			
Date rec'd	Ack	To Manager	SC G/D?