

Reasonable Adjustment notification form



To be completed where the Assessment Centre has permitted the Reasonable Adjustment. All sections of this form are mandatory.

Centre name	
Centre approval code	

Before completing this form, please ensure that the application of the Reasonable Adjustment by the Assessment Centre is permitted – see section 9.4 and Appendix A of the *Guidance on the application of Reasonable Adjustments and Special Consideration in AAT assessments*.

Name of student	
AAT Student ID	
Qualification / EPA	
Assessment / component name(s) or code(s)	
Planned date of assessment	
Specific impairment	<i>e.g. dyslexia</i>
Is this impairment:	Temporary <input type="checkbox"/> Permanent <input type="checkbox"/>
If temporary, please indicate how long the student may be affected (if known):	
Reasonable Adjustment(s) required	<i>e.g. 25% extra time, supervised rest breaks, use of a Scribe</i>
Supporting evidence provided	

Declaration

I confirm that I have read and understood the *Guidance on the application of Reasonable Adjustments and Special Consideration in AAT assessments* in relation to when and how Reasonable Adjustments can be approved and applied by the Assessment Centre, that the information on this form is accurate and contains the exact details of the Reasonable Adjustment applied for this student's assessment(s), and that the Reasonable Adjustment has been approved and will be applied in accordance with AAT's guidance. Additionally, I confirm that the student has been kept informed of this request and the details contained within it, agrees with the Reasonable Adjustment that will be applied and gives their authorisation for AAT to seek further advice from the author of the student's medical evidence.

Signed:	Date:
Position at Centre	

This form must be completed and submitted, with all necessary supporting evidence, to AAT prior to the assessment(s) being scheduled.

Please bear in mind the information detailed within section 9.4.4 when planning the assessment date.

Return to: Assessments Operations team
Email: assessment.operations@aat.org.uk

For internal AAT use only

Reference:		Receipt acknowledged:	
Form received:		Information requested:	
Clerical checks:		Approved / rejected:	