**APPLICATION FORM: OPINION ON PROGRESSION TO PART III**

For students who failed to progress onto certain fourth year courses due to illness or grave cause. There is no automatic progression route, however, students can request an opinion from the EAMC on whether their examination results were impacted by illness or grave cause. The student can then provide the opinion to the University academic authority considering progression onto the relevant course.

Before completing this application form, the College and student **must** read the [Guidance](https://www.cambridgestudents.cam.ac.uk/exams/about-eamc/guidance-notes-and-application-forms).

The Guidance complements the relevant [Statutes and Ordinances (Ch. 3 Examinations)](http://www.admin.cam.ac.uk/univ/so/).

Email the completed form and supporting evidence to eamc@admin.cam.ac.uk.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Criteria for opinion on progression to Part III exam allowancesThe fourth year courses affected are:

|  |  |
| --- | --- |
| * Chemical Engineering Tripos Part IIB
 | * Manufacturing Engineering Part IIB
 |
| * Computer Sciences Tripos, Part III
 | * Mathematical Tripos Part III
 |
| * Engineering Tripos Part IIB
 | * Natural Sciences Tripos, Part III
 |
| * Management Studies Tripos
 |  |

 Illness or grave cause is:1. serious;
2. unanticipated;
3. entirely beyond the student’s control;
4. close in time to the assessment; and
5. evidenced by contemporaneous evidence from an independent, appropriately qualified source
 |

**1. Student details**

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | USN |  |
| Surname |  |
| First name(s) |  |
| College |  |
| Email |  |
| Part III course student wishes to commence |  |
| Has the student been involved in any other University process that affected their exam marks, including an ongoing process? *e.g. academic misconduct or the Examination Review Procedure. Where answering ‘yes’, details must be included in the Tutor letter.* | Yes / No |

**2. Student’s record to date**

|  |  |  |  |
| --- | --- | --- | --- |
| **Academical year** | **Tripos & Part e.g. MAT0**  | **Terms kept** | **Result** |
| **M** | **L** | **E** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**3. Reason for application**

*Brief summary e.g. student missed one exam due to illness, as outlined in Tutor’s letter*

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**4. Supporting evidence**

***This application must be accompanied by ALL evidence.*** *Where applications are incomplete, it is likely that consideration of the application shall be delayed until the following Committee meeting.*

|  |  |
| --- | --- |
| ***Evidence*** | ***Tick to confirm*** |
| Tutor or Senior Tutor letter detailing the reason for the application |[ ]
| Contemporaneous, independent evidence, complying with the Guidance *(e.g. medical evidence for illness)* |[ ]
| Where relevant, the Student Support Document (SSD) – all sections |[ ]
| Supervision reports for the academical year(s) in question |[ ]
| The student’s timetable and all available exam marks (including provisional marks) for the relevant examination |[ ]

**5. Tutor and Senior Tutor details**

*Where the student is making a ‘direct application’ the Tutor’s name should be completed all other boxes can be left blank. Colleges will be informed of all direct applications but will not receive copies of any medical or other sensitive evidence attached with the application.*

|  |  |
| --- | --- |
| Tutor name *(inc. title)* |  |
| Tutor email |  |
| Tutor signature |  |
| Date of signature |  |

|  |  |
| --- | --- |
| Senior Tutor *(inc. title)* |  |
| Senior Tutor signature |  |
| Date of signature |  |

***The following section must be completed by the student***

**6. Student Declaration**

Applications must be accompanied by a completed student declaration. The student shall tick and sign to confirm agreement with the following statements:

|  |  |
| --- | --- |
| ***Statement*** | ***Tick to confirm*** |
| I have read the Guidance notes (linked at the top of this form). |[ ]
| I am aware of the full contents of this application and can confirm it is an accurate and correct account of the situation, to the best of my understanding. |[ ]
| I confirm that I believe my application meets the criteria set out in the Guidance and listed at the beginning of the form. |[ ]
| I am aware that I can provide a brief statement outlining the impact of the illness or grave cause, which must be concise, factual and linked to the relevant criteria. |[ ]
| I confirm that I give my consent for the enclosed supporting evidence to be provided, on a confidential basis, to the to the members of the University’s Examination Access and Mitigation Committee, and supporting administrators.  |[ ]
| I understand that the evidence will form part of the record for any future applications to the University’s Examination Access and Mitigation Committee.  |[ ]
| *Optional*I understand that the College will submit this application and I will receive an outcome directly from the University (with the College copied into it).*By ticking this box, you have opted-in to receive your outcome directly from the EAMC. If you leave the box blank, the outcome will be sent your College only, who will ensure you are made aware of the outcome.* |[ ]

|  |  |
| --- | --- |
| Name  |  |
| Signature |  |
| Date |  |

The University shall handle this information in accordance with the requirements of data protection legislation and will not divulge its contents to any third party or use it for any other purpose without your further consent. General details about the University’s use of personal information are published at <https://www.information-compliance.admin.cam.ac.uk/data-protection/general-data>.