

## **Reasonable Adjustment Request form**

Please complete all fields and submit the form to <a href="mailto:SELT@languagecert.org">SELT@languagecert.org</a>. Requests for reasonable exam.

<b>Details</b>					
Candidate Name			URN		
Test Centre Name			Test Centre ID		
SELT Exam					
Date of SELT exam					
What type of reasonable adjustment are you requesting?					

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- Medical certificate
- Psychological or other professional assessment report
- Prior assessment of the candidate's needs
- History of provision for the candidate within the centre

Declaration:					
I confirm that the information provided on this form is accurate to the best of my knowledge.					
Submission Date		Candidate's Signature			





## Notes on the completion of the Reasonable Adjustment Request Form

LANGUAGECERT® has designed this form to ensure it is easy to understand and complete. Please read the steps below for additional guidance on completing the form.

- In the box "What reasonable adjustment type are you requesting?", please state precisely the nature of the disability or indisposition and its effects in relation to the assessment (e.g. cerebral palsy affecting movement of hands).
- The candidate is advised, wherever possible, to consult a specialist advisory service or other external service on the most appropriate arrangements and then consider their advice in the light of the qualification specification(s).
- Please specify any information/evidence enclosed with the reasonable adjustment request which will assist LANGUAGECERT® to understand the case. Medical or other appropriate evidence will not always be required but must be provided for cases where the candidate is unable to verify the reasonable adjustment requested to the satisfaction of LANGUAGECERT®.

For additional information please refer to LANGUAGECERT®'s SELT Reasonable Adjustment and Special Considerations Policy.

