

Reasonable Adjustment Request form

Please complete all fields and submit the form to info@languagecert.org. For further guidance on completing the form, please refer to the Notes section at the end of this document.

Details			
Candidate Name		Candidate No	
Test Centre Name*		Test Centre ID*	
Exam Date (If not applicable, please leave this space blank.)		Exam Format	Paper-based <input type="checkbox"/> Computer-based <input type="checkbox"/> Online (OLP) <input type="checkbox"/>
Qualification Title (e.g., IESOL B2, LTE A1-C2)			
Part of Exam requiring Adjustment(s) (e.g., Speaking, Listening only)			
Requested Adjustment(s) (e.g., extra time)			
Condition (e.g., dyslexia, sight/hearing loss)			

Please provide details of any supporting evidence that you are submitting (e.g.):

- **Medical certificate**
 - **Psychological or other professional assessment report**
- **The Test Centre’s assessment of the candidate’s needs**
- **History of provision for the candidate within the Test Centre**

** If the request is being submitted by a candidate, leave blank*

Privacy Notice

(to be signed by the Candidate OR the Test Centre's Representative)

A. Candidate

I hereby grant PeopleCert my consent to use the documentation and evidence provided in support of my request for Reasonable Adjustment, in accordance with the LANGUAGECERT [Reasonable Adjustments and Special Considerations Policy](#). I understand that the information provided will be treated with strict confidentiality and for the sole purpose of determining appropriate accommodations. It will be accessed only by authorized personnel and stored for as long as necessary to accommodate the request, unless otherwise required by law or certification authorities. I understand that I can revoke this consent at any time by contacting dataprotection@peoplecert.org. The withdrawal of consent does not affect the lawfulness of processing based on consent before its withdrawal. More information about the processing of personal data can be found in the PeopleCert [Privacy Policy](#).

B. Test Centre's Representative

In my capacity as a Test Centre's Representative, I confirm that I provided the candidate with the LANGUAGECERT [Reasonable Adjustments and Special Considerations Policy](#) and the PeopleCert [Privacy Policy](#) and received their written consent for processing the documentation and evidence provided in support of the Request form.

Declaration:

I confirm that the information provided on this form is accurate to the best of my knowledge.

Submission Date

Test Centre's Representative
OR
Candidate** Signature

** If the request is being submitted by a candidate, the form should be signed by the candidate.

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.

- Requests for reasonable adjustments should be submitted no later than 30 days before the exams. Please complete a separate form for each candidate and each qualification, listing all parts of the exam for which an adjustment is required.
- The Test Centre is advised to consult a specialist advisory service or another external service whenever possible regarding the most suitable arrangements for the candidate concerned, and subsequently, carefully consider their advice in the context of the qualification specification(s).
- Please provide the original or certified copies of any supporting evidence with this form. Any documents that are not in English must always be accompanied by an English translation.
- In cases where the request is submitted by a Test Centre on behalf of the candidate, the Test Centre Representative / ATCM must support an application for it to be accepted.
- A copy of the LANGUAGECERT Reasonable Adjustment policy can be found here: [Reasonable Adjustments and Special Considerations Policy](#)