

APPLICATION FOR SPECIAL CONSIDERATION

1. INSTRUCTIONS *(to be completed by enrolled students applying for Special Consideration only)*

- a) Use a separate form for each subject.
- b) Write clearly in BLOCK LETTERS.
- c) Complete sections 2, 3 & 4.
- d) Please return this form along with the Medical Certificate or any supporting documents to the Exams Centre within 3 working days from the date of the examination via **exams@help.edu.my**

2. APPLICANT DETAILS

Student Name : _____

Student Number : _____

Programme Name : _____

Programme Code : _____

Semester / Year : _____

3. SUBJECT DETAILS

Course Code / Name : _____

Assessment Date : _____

Assessment Time : _____

I am applying for :

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Special Consideration due to illness or misadventure experienced during the semester.

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Special Consideration due to illness or misadventure experienced during the examination period and/or the preceding week.

4. Please state reason(s) and attach supporting documentary evidence.

Signature : _____

Date: _____

OFFICE USE ONLY

Received by Exams Centre : _____

Date : _____