

Completing your form – PLEASE READ

Before you start, please be assured that you will need to provide a

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EXTENUATING CIRCUMSTANCES FORM - EC1

1. Name of the accused: [Redacted]

2. Name of the victim: [Redacted]

3. Name of the witness: [Redacted]

4. Name of the police officer: [Redacted]

5. Name of the prosecutor: [Redacted]

6. Name of the judge: [Redacted]

7. Name of the court: [Redacted]

8. Name of the district: [Redacted]

9. Name of the province: [Redacted]

10. Name of the court of appeal: [Redacted]

11. Name of the court of cassation: [Redacted]

12. Name of the court of first instance: [Redacted]

13. Name of the court of second instance: [Redacted]

14. Name of the court of third instance: [Redacted]

15. Name of the court of fourth instance: [Redacted]

Please describe how your ability to do the assessment(s) has been affected

10/20/2021

2

module code, module name, type of assessment and date for each

10/20/2021

10/20/2021

10/20/2021

10/20/2021

10/20/2021

I agree to the university processing, producing, publishing and disseminating my research data as described below, in accordance with the terms and conditions of the 2018 UK Data Protection Act, and with any other data software and/or

SI

of which date the info will

1. The information supplied will be kept for a period of up to 3 years, after which it will be destroyed/deleted.

of which date the info will

2. The information supplied will be kept for a period of up to 3 years, after which it will be destroyed/deleted.

of which date the info will

2.2

of which date the info will

extenuating circumstances

Confirm your consent and declaration

Please tick to confirm