

## APPLICATION FOR ALTERNATIVE TEST AND EXAMINATION ARRANGEMENTS

**PLEASE NOTE** At least **two weeks' notice** should be given when requesting Alternative Arrangements. Please return this application to Disability & Wellbeing Support, Room L143 Twist Library or [disabilityhb@eit.ac.nz](mailto:disabilityhb@eit.ac.nz)

<b>First Name:</b>		<b>Surname:</b>	
<b>Student ID:</b>		<b>Phone:</b>	
<b>Email:</b>			
<b>Course:</b>			

### Support needed:

- Extra Time                       Reader                       Writer                       Separate Room  
 Enlarged Format                       Computer                       Other (please state) \_\_\_\_\_

Reason for request:


Date	Paper	Start Time	End Time	Tutor's Email/ Ext. No

Signature of Student

Date

Received at Disability & Wellbeing Support

Date

Confirmed by Programme Co-ord. / Programme Secretary

Date

Verification of impairment received