

Disability and Dyslexia Reasonable Adjustment Form for Full-time Undergraduate and Postgraduate Studies

The London Institute of Banking & Finance wants to recognise your individual needs and is committed to making reasonable adjustments to enable you to participate fully in academic life. In order for us to assess your requirements, please complete the following information. Requests and supporting evidence should be made to The London Institute of Banking & Finance at least six weeks prior to the date when the adjustment will need to be in place. We may not be able to apply your adjustments if received after this deadline.

Personal information

LIBF number (if known) _____ Title (Mr / Mrs / Ms etc) _____

First name(s) / Given name(s) _____

Last name / Family name _____

Date of birth (DD/MM/YYYY) _____ Gender Male Female

Email address _____

Please provide a telephone number we can use to contact you if necessary:

Telephone no. _____ Mobile no. (if different from Telephone no.) _____

Contact address _____

Postcode / Zipcode _____ Country _____

UCAS / UKPASS no. _____

Academic course _____

Please tick the boxes that you feel best describe you:

- You have a social / communication impairment such as Aspergers syndrome
- You are blind or have a serious visual impairment
- You are deaf or have a serious hearing impairment
- You have a long standing illness or health condition such as cancer, HIV or epilepsy
- You have a mental health condition, such as depression or anxiety disorder
- You have a specific learning difficulty such as dyslexia, dyspraxia or ADHD
- You have physical impairment or mobility issues
- You have a disability, impairment or medical condition that is not listed above

The London Institute of Banking & Finance requires a statement from a medical professional that confirms the nature of your disability eg Doctor's or Consultant's letter, Educational Psychologist's or Specialist Teacher's Assessment report. If you are unsure what documents to send please contact us for further advice. The London Institute of Banking & Finance may request further supporting evidence and, in all cases, please submit either original documents or certified copies as photocopies are not acceptable.

Do you want The London Institute of Banking & Finance to return the enclosed documents? Yes No

Is this a permanent impairment? Yes No

Please give any additional information below that you feel may be relevant:

Funding for support

The Disabled Students' Allowances (DSA) provide funding to UK students to pay for any additional costs they may incur as a direct result of studying a Higher Education qualification. This funding is not a loan and is not means-tested. Although there is no deadline for applying for DSAs, the application process can take around 14 weeks so the sooner you apply, the greater the chance of having everything you need in place for the start of your course. For further details please visit www.direct.gov.uk/studentfinance.

Have you applied for and been awarded the Disabled Students' Allowance?

Yes No - I am not eligible No - other reason (please specify) I am currently applying for funding

Requirements for Support

Listed below are various types of possible support available to students. Please indicate below your requirements:

Lectures, classes and seminars	Tick
A note taker who will attend lectures with you and take notes	<input type="checkbox"/>
Lecture notes in advance	<input type="checkbox"/>
Written information, such as lecture hand-outs and reading lists, in alternative formats	<input type="checkbox"/>
Permission to record lectures	<input type="checkbox"/>
Support to manage workload	
Mentor support – for students with mental difficulties, chronic health conditions and Asperger Syndrome	<input type="checkbox"/>
Access to the physical environment	
Assistance with evacuating a building quickly in an emergency	<input type="checkbox"/>
Assistance in opening heavy doors	<input type="checkbox"/>
Signage (eg tactile)	<input type="checkbox"/>
Level access to buildings (via lift or ramp)	<input type="checkbox"/>
Ergonomic Furniture (including seating / desks)	<input type="checkbox"/>
Reserved area for wheelchair / mobility scooter	<input type="checkbox"/>
Easy access to bathroom facilities	<input type="checkbox"/>
Reserved seating near front / light source / window / exit	<input type="checkbox"/>
Access to communication and information	
Loop / Infrared system for hearing aid	<input type="checkbox"/>
Examination arrangements	
Extra time	<input type="checkbox"/>
Use of a word processor	<input type="checkbox"/>
A reader	<input type="checkbox"/>
An amanuensis (scribe) to transcribe your answers	<input type="checkbox"/>
A separate room from the main examination hall	<input type="checkbox"/>
Rest or nutrition breaks	<input type="checkbox"/>
Examination paper produced in an alternative format	<input type="checkbox"/>
Please specify:	<input type="checkbox"/>
Additional information or comments	
If the support you require is not listed above, please provide details below so that your request may be considered.	

Please read with care:

Your consent is requested for the following in accordance with Registration/Notification under the Data Protection Act 1998:

Part A

To hold all your personal information regarding your disability / specific learning difficulty on a paper file. To maintain electronic records of your support needs on our internal systems.

Part B

To appropriately disclose relevant parts of this information to other members of staff, funding bodies eg Student Finance England and DSA Assessors; in the course of their employment for the planning, delivery, monitoring and enhancement of the support. The extent of the content and the particular person(s) to which this information may be shared with will be carefully considered under a strict 'need to know' protocol.

Please sign the section below if you are in agreement with parts A and B

I agree with parts A and B as outlined above

Signature _____ Date _____

OR

Part C

Disclaimer

If you do not consent to information being entered onto The London Institute of Banking & Finance's data system then please sign this section. This will result in departments being unaware of your individual circumstances.

Signature _____ Date _____

Please send this form to:

Full-time Programmes Team
The London Institute of Banking & Finance
25 Lovat Lane
London
EC3R 8EB
Tel: +44 (0)207 337 6293/4
Email: ftp@libf.ac.uk

FOR OFFICE USE ONLY

Date received _____

Evidence received? Yes No

All requested adjustments approved? Yes No

If no, please give reason _____

Approved by _____

Passed to Assessment Services _____