

Higher Education Reasonable Adjustment Form

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 at least eight 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.

YOUR DETAILS

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

*A date of birth is compulsory to activate your online account.

CONTACT DETAILS

Email address* _____

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

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

*Please note that having a valid email address is a compulsory requirement of study.

ADDRESS DETAILS

Address _____

Postcode / Zipcode _____ Country _____

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 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. We may request further supporting evidence and, in all cases, please ensure your evidence is provided on official headed paper, it is dated, it specifies the reasonable adjustment(s) required and for how long the reasonable adjustment(s) is needed for. Please send photocopies or scans as we are unable to return original documents

Is this a permanent impairment? Yes No

What date the impairment will end? _____

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

Requirements for Support

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

Access to the physical environment for examinations	Tick
Assistance with evacuating a building quickly in an emergency	<input type="checkbox"/>
Assistance in opening heavy doors	<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"/>
Loop / Infrared system for hearing aid	<input type="checkbox"/>
Examination arrangements	
Extra time	<input type="checkbox"/>
Use of a computer	<input type="checkbox"/>
A reader	<input type="checkbox"/>
A scribe to transcribe your answers	<input type="checkbox"/>
A separate room from the main examination room	<input type="checkbox"/>
Rest or nutrition breaks	<input type="checkbox"/>
Examination paper produced in an alternative format (eg large type face)	<input type="checkbox"/>
Please specify:	<input type="checkbox"/>
Lectures	
Learning materials required in advance	<input type="checkbox"/>
Learning material required in an alternative format, please provide details on what format you need (eg large type face)	<input type="checkbox"/>
<hr/>	
Loop / Infrared system for hearing aid	<input type="checkbox"/>
Permission to record lectures – own equipment to be supplied	<input type="checkbox"/>
(Students can apply for a Disabled Students Allowance for a Specialist equipment allowance. Visit www.gov.uk for further information.)	
Additional information	
If the support you require is not listed above, please provide details below so that your request may be considered.	

YOUR PERSONAL DATA

We will use and protect your personal data in accordance with current data protection legislation to evaluate your claim and make reasonable adjustments to your assessment where approved. We will share the information you have provided with appropriate members of staff and third parties where necessary to implement a reasonable adjustment. Further details, including your rights, the disclosure of data to third parties, storage, retention and how to amend your personal data, can be found within our **Privacy Notice** (www.libf.ac.uk/privacy).

- Please tick the box if you give consent for your lecturer to be advised of all your reasonable adjustments.
Please note some reasonable adjustment information must be shared with appropriate lecturers to implement certain reasonable adjustments listed above.

DECLARATION

- I declare that the information contained in this form is true and accurate.
- I confirm that by completing and submitting this form and associated evidence, I give consent to the processing and secure storing of the evidence provided.

Signed _____ Date _____

Please note that all unsigned forms will be returned and will result in a delay in the processing of your enquiry

Please send completed forms to:

**Full-time and Postgraduate
Programme Team**
The London Institute of Banking & Finance
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London,
EC3R 8EB

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