



COM02 – APPLICATION FOR ACADEMIC CONCESSION (POSTGRADUATE PROGRAMMES)

NOTE for Students

- Complete all sections (A, B and C) on page 1 of this form.
- Attach supporting documentation, if appropriate. This may include medical certificates.
- Email your completed application and supporting documents to the course convenor and programme convenor for recommendation.
- Course Convenors or Programme convenors will forward the form to the relevant authority for final sign off. This is **NOT** done by the student.
- Applications for concessions affecting the **first semester** must be submitted by no later than the end of the **first week** of the **first term**.
- Applications for concessions affecting the **second semester** must be submitted by no later than the end of the **first week** of the **third term**.

NOTE for ALL completing this form

- This is a fillable PDF form with form fields, so please first download it to your computer (right-click and *Save link as*) and then complete it using [Adobe Acrobat Reader](#). Do not complete it in your web browser.
- Do **not** use Adobe Acrobat *Fill & Sign* to complete or sign this form, as this will disable all form fields, making any remaining, incomplete fields unusable. If you have not yet created your Adobe PDF digital signature/ID, for help, see: [Create a self-signed digital ID](#).

A. STUDENT DETAILS (To be completed by student)

Student number										Degree & Plan	
Surname										First names	
Email address											

B. NATURE OF CONCESSION (To be completed by the student)

Please select an option or indicate another type of concession:	
Nature of concession (choose one option) Note: Multiple concessions require separate forms	
Other concession (please provide detail below)	

C. MOTIVATION FOR CONCESSION (To be completed by the student)

Please indicate the course/s affected											
Course Code								Course Name			
Motivation for concession											
Student Signature								Date			



D. RECOMMENDATION (To be completed by the Academic Staff)

COURSE CONVENOR RECOMMENDATION					
<input type="checkbox"/>	I support the concession request		<input type="checkbox"/>	I do not support the concession request	
Reason					
Name		Signature		Date	

PROGRAMME CONVENOR RECOMMENDATION					
<input type="checkbox"/>	I support the concession request		<input type="checkbox"/>	I do not support the concession request	
Reason					
Name		Signature		Date	

E. FINAL APPROVAL (To be completed by the Academic Staff)

HEAD OF DEPARTMENT OR NOMINEE AS FINAL AUTHORITY					
<input type="checkbox"/>	Approved		<input type="checkbox"/>	Not approved	
Reason					
Name		Signature		Date	

DEAN OR NOMINEE					
<input type="checkbox"/>	Approved		<input type="checkbox"/>	Not approved	
Reason					
Name		Signature		Date	

Faculty Manager/Nominee Confirmation					
Name		Signature		Date	