Application for Reasonable Adjustments for apprentices/learners with particular requirements

Please complete all sections of the form. Incomplete applications cannot be considered.

|  |  |
| --- | --- |
| Provider/Centre name |  |
| Coordinator name |  |
| Apprentice/Learner name |  |
| Apprentice ULN |  |

List below the Innovate Awarding qualifications/apprenticeship standard or assessments for which the apprentice/learner requires reasonable adjustments. Please ensure every component/qualification /assessment method that requires an adjustment is listed.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Qualification/Standard title (as it shows on QuartzWeb/ EPAPro) | Level | Qualification code (Qualifications only) | Assessments requiring adjustments |
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For qualifications please note: Some adjustments within qualification delivery do not require Innovate Awarding’s prior approval. Please read the Qualifications Reasonable Adjustments and Special Consideration policy for guidance.

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| **Reason for application:**(Please include a summary of why the application is being submitted and the support given to the apprentice/ learner during their training) |
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| **Specific details of the reasonable adjustments being requested:**(Where adjustments are being requested for multiple assessments methods, please ensure required adjustments are listed specifically for each component) |
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**Please attach documentary evidence from a relevant independent specialist in support of this application. Applications which do not have the relevant documentary evidence cannot be considered and will be rejected until appropriate evidence is provided.**

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| **Declaration** |
| Has the apprentice/learner received learning support during the year? | Yes / No  |
| If the apprentice has received learning support, please attach a report in support of this application from the appropriate service within your centre/training provider.  |
| **This application is supported by the employer/provider coordinator and relevant tutors:** |
| Signed by Coordinator or Examinations Officer: |  |
| Print name: |  |
| Date of application: |  |

**The application will not be processed without a written or electronic signature.**

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| **Please return the completed form and supporting evidence to:** |
| Email | Compliance@innovateawarding.org  |
| Post | FAO ComplianceInnovate AwardingBlock F291 PaintworksArnos ValeBristol BS4 3AW |

If you have any queries at regarding completing and submitting this form, or about reasonable adjustments in general, please contact Innovate Awarding:

**Email**: Compliance@innovateawarding.org

For completion by Innovate Awarding only

Date application received by Innovate Awarding:

The application cannot be considered because:

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|  |

The above-named apprentice/learner may have the following reasonable adjustments arrangements for the examinations set out below:

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Please ensure that the apprentice/learner and all relevant staff, including invigilators, are aware of this agreement and that the appropriate arrangements are put in place.

Innovate Awarding Regulation & Compliance Manager signature:

Date: