



## Absence/Deferral from Exams and Assessments

This form should be submitted by the **Tutor/Supervisor** to Student Cases by emailing [studcase@tcd.ie](mailto:studcase@tcd.ie) (for Undergraduates) and [pgcases@tcd.ie](mailto:pgcases@tcd.ie) (for Postgraduates).

Please complete ALL sections below. Incomplete forms will cause delays in processing.

### Section A: Student Details

Date of Request:	<input style="width: 95%;" type="text"/>	Tutor/Supervisor Name:	<input style="width: 95%;" type="text"/>
Student Name:	<input style="width: 95%;" type="text"/>	Tutor/Supervisor Email:	<input style="width: 95%;" type="text"/>
Student ID:	<input style="width: 95%;" type="text"/>	School/Course Office Contact:	<input style="width: 95%;" type="text"/>
Course Name:	<input style="width: 95%;" type="text"/>	School/Course Office Email:	<input style="width: 95%;" type="text"/>
Year of Course:	<input style="width: 95%;" type="text"/>		

Current Status:                      1. On Books                      2. Off-books taking Assessments (OBA)

### Section B: What is the student requesting?

**Please select from the list below:**

Defer exam(s)/assignment(s) from Semester I Session to Reassessment Session

Defer exam(s)/assignment(s) from Semester II Session to Reassessment Session

Other

**Please list exams below:**

Module Code	Module Name	Date of Exam	Has the student attempted the exam for this module?	
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No

**Please list assignments below:**

Module Code	Title of Assignment	Type of Assignment	Original due date of Assignment	If extension provided, new due date
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**Section B: What is the student requesting?**

**Please provide supporting details and evidence (Mandatory):**

Have you included relevant supporting documentation?                      Yes                      No

Please confirm that you have discussed this request with your Tutor/Supervisor?                      Yes                      No

Please confirm that you have read and understood the implications of deferring or being absent for an exam/assignment in the college calendar.                      Yes                      No

**Section C: Privacy Statement**

This form, together with all supporting documentation, is submitted on the understanding that the data contained therein are used solely for the purposes of the consideration of application to go off-books. The personal data included in this application form will be processed in accordance with the Data Protection Policy of Trinity College Dublin and the Privacy Notice of Trinity College Dublin and will be shared with relevant Schools/Departments/Course Offices.

**Student's Signature**

**Date**