

ROYAL ACADEMY OF DANCE

Special Consideration Application Form

Special considerations are post-exam adjustments to the mark for candidates who complete the RAD live and filmed exams, who have prepared for and are present, but who may have been disadvantaged by **adverse circumstances that arose immediately before or at the time of the exam.**

Notes on Completing the Form

Before completing this form please read the [Reasonable Adjustments and Special Consideration Policy and Procedures](#), available on the RAD website.

Applications for Special Consideration must be submitted by the teacher, parent/guardian, or candidate. Should you wish to make the examiner aware of any condition or issues that might impede the performance or request adjustments to the examination, please refer to the *Reasonable Adjustment* procedure.

Applications can be submitted from the closing date for entry and **up to 5 working days following the exam**. Applications after this date will not be accepted. Where multiple candidates are affected, please complete one form and attach a list of candidates.

Please send the completed form and medical documents **as separate documents** to Examinations Customer Service via examscustomerservices@rad.org.uk.

Privacy Policy

This information is collected purely to enable and support the processing of the adjustment request, in line with regulatory and access requirements and good practice.

This form will be securely retained by the RAD until you receive your certification after which it will be destroyed.

For more information, please see the [RAD Examinations Privacy Policy](#), available on the RAD website.

188 York Road, London SW11 3JZ
royalacademyofdance.org +44 (0)20 7326 8011

Patron: Her Majesty Queen Elizabeth II Vice-Patron: HRH The Duchess of Cornwall
President: Dame Darcey Bussell DBE Chairman: Stephen Moss Chief Executive: Tim Arthur
Royal Academy of Dance is a charity registered in England and Wales No.312826



Teacher / applicant name:	School name & RAD ID:	
Email address:		
Candidate name:	Candidate RAD ID:	
Exam entry ID:	Tour code (if known):	
Please tick of the boxes below: Face-to-Face <input type="checkbox"/> Filmed <input type="checkbox"/>	Please tick if candidate is 18 or over: <input type="checkbox"/>	
Examination type / level:		
Date of examination:	Examiner name:	
Please summarise the adverse circumstances affecting the examination and the degree to which you think the candidate has been affected:		
Medical documentation is attached: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Date problem / condition arose (if applicable):		
<p><u>Declaration by Applicant:</u> I agree that the information provided on this form is accurate and fully supports the application.</p> <p>Applicant Name:</p> <p>Position (e.g. teacher, school administrator):</p> <p>Signature: * Date:</p>		

Candidate/Parent/Guardian Consent: I consent to the provision of this information relating to me/my child/ward (*please delete as appropriate*) to be used in line with the RAD's procedures for Special Considerations and Examinations.

Name:

Position (e.g. candidate, parent, guardian):

Signature: *

Date:

Please do not enter any other personal information (i.e. email address, phone number, ID number, etc.).

*For electronic applications where an e-signature cannot be provided the name may be typed and will act as a binding signature. For the candidate / parent / guardian's signature, we may ask for proof of the authenticity of the name being typed by the named person, such as independent verification or an email trail, etc.