

## NESBURY Application for Variation to Exam Conditions

				Student						
Family Name				ID						
First Name(s)				Semester						
Program Enrolled (please circle)	FSP		Dip BUS		Dip ENG		Dip IT			
Date Of Birth		1	Daytime Telephone	,			1			
Student Signature						Dat e	/	/20		
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Course Name / Code		□ Laptop					Ap	proved	i t	
,		☐ Seat Po	ositioning				YES	/	NO	
			ent During Exan					,	NO	
Exam Date:		□ Different Exam Paper								
	☐ Other (Please Specify)					Signed				
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Time:							Date	Date		
Course Name / Cod	□ Laptop					Ap	Approved			
Course Name / Cou	C		ositioning				VEC	,	NO	
			_				123	/	NO	
Exam Date:	☐ Movement During Exam									
	☐ Other (Please Specify)					Signed				
		L Other (	Trease Specify)							
Time:							Date			
Carrage Name / Cada		□ Laptop						Approved		
Course Name / Cod	e		ositioning					,	NO	
								/	NO	
Exam Date:	☐ Movement During Exam									
LXaiii Date.	☐ Other (Please Specify)					Signed				
		L Other (	Please Specify)							
Time:							— Date		_	
	□ Laptop						Approved			
Course Name / Code		□ Seat Positioning					_			
			ent During Exan					/	NO	
Exam Date:			nt Exam Paper _							
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Time:							— Date			
Course Name / Code		□ Lanton					Α	proved	t	
Course Name / Cou	е		ositioning					,	NO	
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Exam Date:			nt Exam Paper _							
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		L Other (	Trease Specify)							
Time:							— Date			
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PLEASE ATTACH SUPPORTING DOCUMENTATION										
□ Medical □ Other										
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