

APPLICATION FOR SPECIAL EXAMINATION ARRANGEMENTS AT NTNU

DEADLINES: FEBRUARY 15th IN THE SPRING SEMESTER AND SEPTEMBER 15th IN THE AUTUMN SEMESTER

PERSONALIA:

Name: _____

Address: _____

Postal code and area: _____

(The response to your application will preferably be sent to your digital mailbox, or to the address stated above.)

Norwegian ID number (11 digits): _____

Student number: _____ Phone number: _____

Campus: _____

Programme of study: _____

REASONS FOR APPLYING:

Applies all examinations: autumn 20_____ spring 20_____ entire length of your programme of study : _____

First date of examination current semester: _____

If the application applies to single courses, please fill in:

Course code	Course name	Date of examination

I APPLY FOR THE FOLLOWING SPECIAL ARRANGEMENTS:

YOU MUST PROVIDE APPROPRIATE DOCUMENTATION [CHOOSE AN OPTION]

- Applications due to dyslexia must be documented with a report from a speech therapist.
- Other needs must be documented by a doctor or other suitably qualified practitioners. Please use the form «Statement from doctor/specialist». (Form and guidance below.)

Documentation is attached to this application []

Documentation has been previously submitted []

Documentation will be forwarded []

Documentation must be submitted within 1 mths. after the deadline, unless otherwise agreed.

I undertake to notify The Examinations Office if changes occur in the need for special arrangements, or if I am prevented from attending the exam.

Place/date

Signature

Please send the application form and documentation to:

TRONDHEIM

Send to
Examination office NTNU,
Postbox 8900,
NO-7491 Trondheim,
or submit by person to the
Examinations Office
(Jonsvannsveien 82, 3rd floor).

GJØVIK

Send to
NTNU in Gjøvik,
Postbox 191,
NO-2802 Gjøvik,
or submit by person to
Studenttorget.

ÅLESUND

Send to
NTNU in Ålesund
v/Postmottak,
Postbox 1517,
NO-6025 Ålesund
or submit by person in the
reception, marked
Postmottak.

STATEMENT FROM DOCTOR/SPECIALIST

ATTACHEMENT TO APPLICATION FOR SPECIAL EXAMINATION ARRANGEMENTS AT NTNU

Information in this form is exempted from public disclosure according to the Freedom of Information Act §13 and the Public Administration Act §13 1st Subsection no. 1.

TO BE FILLED IN BY A DOCTOR/SPECIALIST:

Name of the patient: _____

Norwegian ID number: _____

Description of the disability (diagnosis/symptom/medication) and consequence for performance during the exam:

Does the disability/symptom/medication cause problems with:

- Written examination (yes/no): _____
- Home examination (yes/no) _____
- Oral examination (yes/no): _____

Is the disability/symptom/need for medication

- Chronic (yes/no): _____ assumed durability: _____
- Season related/periodic (yes/no): _____ period: _____

Special arrangements that might reduce the disadvantage caused by the disability during the examination:

This statement is valid until (month-year): _____

Place and date

Signature and stamp

DOCUMENTATION REQUIREMENTS FOR APPLICATION FOR SPECIAL EXAMINATION ARRANGEMENTS

THE PURPOSE OF SPECIAL EXAMINATION ARRANGEMENTS

The purpose of special arrangements is to compensate for the disadvantage that the disability/health problem causes during examinations. At the same time, we aim to test every student equally. The documented disability must therefore be remedied with compensatory measures, without providing an advantage over other students.

REQUIREMENTS FOR CONTENTS OF DOCUMENTATION

- The documentation must distinctively clarify the disadvantage caused by the disability/health problem during examinations. A diagnosis does not automatically lead to rights to special arrangements. When it comes to for example allergies, diabetes, migraine and epilepsy, we only grant special examination arrangements for students who can document that they are indisposed to the extent that they have an actual disadvantage without special arrangements during the exam.
- The documentation must clarify if the need for special arrangements is immediate (temporary) or permanent, and indicate the expected duration.
- The documentation should provide enough information to give us a ground for comparison between applications from students with similar needs for special arrangements.
- NTNU prefers that a doctor, or other suitably qualified practitioners, use this form as documentation, but we also accept other statements. If you choose to use other statements, please ensure that it contains information equivalent to the information demanded in this form.
- Applications due to dyslexia must be documented with a report from a speech therapist (or equivalent), not with a medical certificate.

GENERALLY

- The documentation must include both a stamp and signature from the doctor/health care institution.
- The student him/herself must enclose the documentation with the application, and thereby consent that the required health information is given.

Both application and documentation is processed confidentially; and information filed exempt from public disclosure.