

# Department of Mathematics, CIT

## Application for a reassessment of a missed assessment

Name: \_\_\_\_\_

CIT ID: \_\_\_\_\_ Class: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Module code and title: \_\_\_\_\_

\_\_\_\_\_

Module lecturer's name: \_\_\_\_\_

Original assessment date: \_\_\_\_\_

**Please explain the circumstances which caused you to miss this assessment:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Have you attached supporting documentation?** \_\_\_\_\_

### **Declaration**

I declare that the information provided in this application, together with any supporting documentation provided, is a true and accurate representation of the circumstances on which this application is based.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

FOR OFFICE USE ONLY

**Departmental recommendation**

IEC claim valid? \_\_\_\_\_

Reassessment given? \_\_\_\_\_

Additional comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If a reassessment is given, then the following should be completed:

Date of reassessment: \_\_\_\_\_

Time of reassessment: \_\_\_\_\_

Venue for reassessment: \_\_\_\_\_

Lecturer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_