



REGISTRAR, ACADEMIC AFFAIRS

Tel: 028 00 36 56
Fax: 020 802 92 08

P.O. Box 103- 40404
RONGO,
KENYA

Web: www.rongovarsity.ac.ke.

EXAMINATION DEFERMENT APPLICATION FORM

1. This form is intended for use by students who wish to defer examination. Requests for deferral of examination are not automatically granted, but are decided on a case by case basis.
2. Supportive documents must be attached to each application. The application will not be processed without supporting documentation.
3. If approved, deferred exams are re-scheduled as special examinations.

SECTION A: PERSONAL DETAILS

Surname: Other Names:
Student Registration No.: National ID No.:
Postal address: Postcode:
Telephone: Email:

SECTION B: COURSE AND EXAMINATION DEFERMENT DETAILS

School:
Department:
Programme name:
Year of study: Semester:
Course Code(s):
.....
.....

Date of examination(s):
.....

Reasons for deferred examination request:
.....
.....

SECTION C: OFFICIAL USE ONLY

Head of Department

Accepted

Rejected

Comments:

Name: Signature Date

Official stamp:

Dean of School

Accepted

Rejected

Comments:

Name: Signature Date

Official stamp:

Registrar, Academic & Student Affairs

Accepted

Rejected

Comments:

Name: Signature Date

Official stamp:

Cc: Dean of Students
Finance Officer

REASONS FOR DEFERMENT

Students may apply for a deferment of examination, if they are not able to attend an examination on a particular date(s) on the grounds of illness, accident, temporary disability, sporting or cultural commitments at a state or national level, bereavement, compassionate circumstances and financial. An application for deferred examination is only applicable where the assessment item or examination has NOT BEEN attempted.

IMPORTANT NOTE: Applications may be rejected if there is reason to believe that a student is seeking to achieve an unfair advantage through deferred assessment. This judgment may be based on the particular circumstances of the application together with the student's academic record and history of deferred examination applications.

DOCUMENTARY EVIDENCE

Applying for a Deferment of Examination on medical grounds

Students applying for deferred assessment on medical grounds must submit a medical certificate, completed by a registered medical or dental practitioner stating:

- The date on which the practitioner examined the student.
- The severity and duration of the complaint.
- The practitioner's opinion of the effect of the complaint on the student's ability to undertake the assessment item.

Please note that in all cases the certificate must contain the Medical Practitioner's stamp where indicated, or, the Medical Practitioner's contact details.

Students are advised to keep a photocopy of the completed original Certificate for their records.

Applying for a Deferment of Examination on Compassionate Grounds

Compassionate grounds might include:

- Death of a family member or close relative
- Serious illness of a family member or close relative
- Involvement in an accident where this does not involve injury (if injured a medical certificate would be appropriate)

Appropriate documentary evidence for compassionate grounds might include:

- Bereavement notice
- Copy of accident report

Applying for a Deferment of Examination on Financial Grounds

Financial grounds might include:

- Failure to raise requisite fee for the semester

Appropriate documentary evidence for financial grounds might include:

- A duly signed clearance form by the Finance Officer indicating the fee balance.
- Course registration form, duly signed.

SECTION D: STUDENT DECLARATION

Applicants **must** read the 'Reasons for Deferment' and 'Documentary Evidence' sections outlined in the Deferment **Application Information Sheet** at the bottom of this form and sign this form or this form will not be processed.

I have read and understood the 'Reasons for Deferment' section outlined in the Information Sheet. According to these guidelines I believe I am eligible for Deferred Sitting. I have attached supporting documentary evidence to this application form.

Name:

Signature

Date