



BCS
The Chartered Institute for IT
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www.bcs.org

Reasonable Adjustments Request Form

All applications for reasonable adjustments must be submitted a minimum of 10 working days prior to the exam date. Requests for High Education Qualifications must be submitted 4 weeks prior to the exam date.

If you are taking an online exam via a Pearson VUE or via our remote proctored service, you must submit your completed form before booking your exam sitting. Once approved you will be provided details on how to proceed to book your exam.

Failure to submit your request within the minimum time stated above will result in your request being rejected.

Examination title	
Name	
Email address	
Membership Number	
Contact phone number	
Exam to be sat with:	<input type="checkbox"/> BCS Accredited Training Provider (please state name here) <input type="checkbox"/> Pearson VUE Testing centre <input type="checkbox"/> Remote location (remote proctored) <input type="checkbox"/> BCS Public exam

What is the nature of your disability? (tick or complete as appropriate)

- | | |
|---|--|
| <input type="checkbox"/> Cognitive impairment e.g. Dyslexia | <input type="checkbox"/> Visual impairment |
| <input type="checkbox"/> Motor difficulties e.g. hand-eye co-ordination | <input type="checkbox"/> Physical impairment e.g. cerebral palsy |
| <input type="checkbox"/> Hearing impairment | <input type="checkbox"/> Religious grounds |
| <input type="checkbox"/> Other (please specify in details section) | |

What reasonable adjustments do you require? (tick and provide details below)

- | | |
|--|--|
| <input type="checkbox"/> Reader / Scribe | <input type="checkbox"/> Larger font |
| <input type="checkbox"/> BSL / English interpreter | <input type="checkbox"/> Coloured paper (pink/blue/green/yellow) |
| <input type="checkbox"/> Rest period / Comfort break | <input type="checkbox"/> Lip speaker |
| <input type="checkbox"/> Own software | <input type="checkbox"/> Own hardware |
| <input type="checkbox"/> Extra time | <input type="checkbox"/> Other |

Please provide further details of requirement:

Extra time required for the disability

The standard time extension for BCS examinations is 25% upon submission of a suitable medical certificate confirming your disability. Up to 100% extra time may be allocated dependent on your particular needs. Your Health Professional must make a recommendation for how much time is required if more than 25% is requested.

Requested additional time in minutes:	
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Please indicate the form of evidence that supports your request and return a copy of the report with this form:

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- The original Health Professional report with specified allowance request clearly detailed
 - A letter from another Awarding Body approving reasonable adjustments
 - A written statement signed by an appropriate religious authority (only applicable on religious grounds)
 - Other (please give details below)
 - Tick the box to confirm that relevant evidence has been attached
-

I confirm that the information on this form is true and accurate and I agree with BCS processing my data.

Signature:	
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Date:	
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Forms should be returned to customerservices@bcs.uk

If you require any assistance with completing this form, then the Customer Service Team would be happy to help. Please call us on + 44 (0) 1793 417 417 during our office hours 08:30 – 17:15 GMT.

GDPR Statement

We collect your personal data to ensure that your request for reasonable adjustments is processed in the appropriate way. We will store your data in our systems for a period of 30 days after the examination has taken place.

Your personal data is fully protected in our system against any risk that can affect its confidentiality, integrity and availability. We do not use automated decision-making for processing your personal data.

The information on this form is only passed on based on a 'need to know' basis. This would normally include the BCS staff member who is dealing with your request and the invigilator who will be required to make adjustments as a result of your request. The invigilator will only be provided the minimum amount of information for them to conduct the extra time according to your requirements. The information completed here will not be shown on your certificate.

In accordance with GDPR, you have certain rights that you can exercise free of charge. You have the right to be informed about data processing, right of access to your data, right to rectification, right to erasure of your data ('right to be forgotten'), right to restriction of processing, right to data portability, right not to be subject to a decision based solely on automated processing including profiling, right to lodge a complaint with the supervisory authority, and the right to compensation and liability for damage suffered by improper handling of your personal data,

By signing this form, you express your free consent to the processing of your personal data according to and within the data processing purposes stated in this privacy and consent notice.

You agree that you understand your rights to withdraw consent at any time, totally or partially, without affecting the lawfulness of processing based on your consent before its withdrawal.

You acknowledge that if you wish to partially withdraw your consent, you can do that by revisiting this privacy and consent notice to state your objections to processing your personal data.
