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| --- | --- | --- | --- | --- | --- | --- |
| **Late Examination Result Submission** | | | | | | |
| School: |  | | | | | |
|  | | | | | | |
| Course Code: |  | |  | |  |  |
|  | | | | | | |
| Course Title: |  | | | | | |
|  | | | | | | |
| Number of Students Affected: | |  | | | | |
|  | | | | | | |
| Date of Submission of Results to External Examiner: | |  | | | | |
|  | | | | | | |
| Expected Date for Results: | |  | | | | |
|  | | | | | | |
| What information has been given to Students: | |  | | | | |
|  | | | | | | |
| Explanation for Late Return of Results: | | | | | | |
|  | | | | | | |
|  | | | | | | |
| Signed by Course Co-ordinator: | |  | | | | |
|  | | | | | | |
| Signed by Head of School: | |  | | | | |
|  | | | | | | |
| Date: | |  | |
|  | | | | | | |
| This form should be completed for each course for which results will be returned after the published deadline. Forms to be submitted to studentrecords@abdn.ac.uk. | | | | | | |