

STUDENT MONITORING C6 FORM

Please complete all fields below

| | |
|--|--|
| Student ID Number | |
| Surname | |
| First name | |
| Course code 'AT RISK' Please submit one form per course | |
| Your university email address | |

Please explain, giving as much detail as possible, the reasons why you were unable to attend classes and what actions you are proposing to make up missed work.

Please send this form directly to the programme administrators. If you have a medical certificate or a letter from the Counselling Service explaining your continuous absence then please hand it in along with this letter. You should note that while the University wishes to support students experiencing personal or medical problems which are impacting on a student's studies, it is only possible to remain registered on a course if you are able to achieve the learning outcomes by making up missed work. The Course co-ordinator may contact you if they require more information or they may wish to meet with you to discuss your current situation.

Course co-ordinators decision Reinstated
 Do NOT reinstate

Where reinstated agreed, please state agreed remedial action and associated timescales.

Staff use only
Date received

Medical certificate attached: Yes No
 Counselling letter attached: Yes No

| | | | | |
|---|--|----------|---|--------|
| | Total number of teaching sessions missed <input style="width: 40px;" type="text"/> | of which | <input style="width: 30px;" type="text"/> | are GC |
| | | | <input style="width: 30px;" type="text"/> | are MC |
| | Sent to Course co-ordinator <input style="width: 350px;" type="text"/> | | | |
| Date student notified: <input style="width: 350px;" type="text"/> | | | | |