# UNIVERSITY OF ABERDEEN ACADEMIC FLEXIBILITY (SPORT) REQUEST FORM

Applications for academic flexibility must be considered and approved by the Academic Flexibility Group prior to attendance at sporting events. All requests for approval must be submitted to academicservices@abdn.ac.uk at least **14 working days prior to flexibility being required**.

## SECTION ONE: STUDENT DETAILS

|  |  |
| --- | --- |
| **Full name:** |  |
| **Student ID Number:** |  |
| **Undergraduate or Postgraduate:** |  |
| **Programme of Study:**  *(e.g. MA Hons English and French)* |  |
| **Year of Study**: |  |

## SECTION TWO: DETAILS OF SPORTING EVENT(S)

|  |  |
| --- | --- |
| **Tournament/Training Event:**  *(including name of Championship where appropriate)* |  |
| **Representative Honours:** |  |
| **Dates of Competition:** |  |
| **Dates required for Travel:** |  |

## SECTION 3A: COURSE/ACTIVITY AFFECTED BY REQUESTING ACADEMIC FLEXIBILITY

Please provide below details of classes: lectures, practicals, tutorials etc. that will be missed during your attendance at the event(s) listed above. Please include details of deadlines for coursework etc. that will be affected. Please add rows as required.

|  |  |  |
| --- | --- | --- |
| **Course Code** | **Course Coordinator** | **Activity Missed** |
|  |  |  |
|  |  |  |

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**SECTION 3B: HAVE ANY PROVISIONAL ARRANGEMENTS BEEN SUGGESTED?**

Please provide below details of any provisional arrangements agreed with your school/course coordinators/lecturers etc., in the event that approval for academic flexibility is granted.

## SECTION FOUR: SUPPORTING STATEMENT

Statement in support of the student’s application to be completed by the Sport and Exercise Team or other approved sporting coach.

|  |  |
| --- | --- |
|  | |
| **Signature:** |  |
| **Date:** |  |

## SECTION FIVE: CONSIDERATION OF APPLICATION

This application will be considered in line with the University Policy on Academic Flexibility and by the Academic Flexibility Group.

|  |  |
| --- | --- |
| **Application Detail:** | *Approved/Rejected* |
| **Reasons for Decision:** |  |
| **Signature:** |  |
| **Date:** |  |

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