

**Bar Course Aptitude Test (BCAT)**

**Extenuating circumstances form**

When completing this form please refer to the BCAT extenuating circumstances policy and procedures.

The form may be accessed in other formats, for further assistance please email [BCAT@barstandardsboard.org.uk](mailto:BCAT@barstandardsboard.org.uk).

***N.B*** *Before completing this form please note the BCAT can be rescheduled or cancelled up to 24 hours prior to the scheduled test with no charge.*

**Please note ALL fields are mandatory.**

|  |  |  |
| --- | --- | --- |
| **Personal details** | | |
| BCAT ID | BCAT\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ | |
| Name (print in block capitals) |  | |
| Address for correspondence |  | |
| Telephone number |  | |
| Email address |  | |
| Have you taken the BCAT? | Yes / No | |
| At which Pearson VUE centre were you scheduled to take / did you take the BCAT? | Test centre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **List the extenuating circumstances you wish to submit to the BSB** | | |
| **i. Please state a) the circumstances you wish to submit and, b) the impact of the circumstances on your ability to schedule the BCAT or complete the BCAT.** | |  |
| **ii. Date(s) on which the extenuating circumstances first occurred and the period covered by documentary evidence.** | |  |
| **iii. List any documents you are submitting as documentary evidence to support your BCAT Extenuating Circumstances Form.** | | **Description of documents** |
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|  |
|  |
| **iv. Please state your preferred outcome(s).** | | Free re-take / Refund / Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Declaration**  **I declare that the information given in this form is true to the best of my knowledge and that I would be willing to answer further questions relating to it if necessary.**  **I have read the Bar Standards Board’s** [**Privacy Statement**](https://www.barstandardsboard.org.uk/privacy-statement.html) **and understand how my data will be handled.** | | |
| Candidate Signature | |  |
| Date | |  |

Privacy Statement: [www.barstandardsboard.org.uk/privacy-statement.html](http://www.barstandardsboard.org.uk/privacy-statement.html)

Your extenuating circumstances form and the accompanying evidence should be submitted to [BCAT@barstandardsboard.org.uk](mailto:BCAT@barstandardsboard.org.uk)

|  |  |
| --- | --- |
| **For BSB Use Only** | |
| Extenuating circumstance submission approved or rejected by BSB | Approved / Rejected |
| Reason for BSB decision |  |
| Approved / rejected by |  |
| Date approved / rejected |  |
| Date Pearson VUE contacted |  |
| Information recorded |  |
| Date student informed |  |