

Academic Services The ClockTower Private Bag 92019, Auckland 1142 Email:

alternative_exams@auckland.ac.nz

Request to Sit Examinations at Other Centres

You may request to sit out-of-centre exams for one of the following reasons (strict criteria apply). Please tick one of the

categorie	es below.	at 01 cc1	ni o onamo ion one or		J			11.37	
Please 'tick'	Category	Criteri	a			Exa	ample	es of documentation	on required
	Bereavement		Family member or close friend (short notice acceptable)			Dea	Death notice or other appropriate evidence.		
	Study	Overse	Overseas study; must be at a tertiary institute				Confirmation form other institute showing enrolment and flight itinerary.		
	Legal	Court a	appearance (short notice	acceptab	le)	Соц	Court notice or court order.		
	Sport/Cultural		enting New Zealand at a g or cultural event.	an internat	ional		Letter from NSO, flight or travel itinerary and a match or game schedule.		
	Wedding	Weddir sibling,	Wedding of an immediate family member (parent, sibling, child) or part of bridal party.			, Inv	Invitation card, letter from marriage celebrant and flight itinerary.		
	Business	Unavoi	Unavoidable business obligation or business travel.			I. Let	Letter from employer, flight itinerary, conference schedules, invitations or other documents will also be required.		
The application form must be submitted with supporting documentary evidence and a copy of your exam timetable. The application will be rejected or declined if there is insufficient evidence. The documentary evidence listed above is an example only. Depending on your situation further evidence may also be required. Please complete and submit this form at least one month before the first affected examination									
STEP 1	Surname:] ID Ni	umber:			
	First name:				Phon	e:			
					Emai	I:			@aucklanduni.ac.nz
STEP 2 Affected Examinations:									
Scheduled examinations: Requested time at other centre (Before the main exam. As close as possible to the scheduled time in Auckland and within 24 hours)									
Course (Code Ca	t. No.	Scheduled Exam Dat	te Star	t Time	End T	ime	Local date	Local Time
STEP 3 Name, contact person and address of alternative venue or centre:									
Name of contact:									
Address of the venue:									

Reason for requesting an alternative venue:							
Data							
Date of departure:							
Attach documentary evidence to support this application (eg, invitation to represent New Zealand)							
Payment should be made at AskAuckland Central if at all possible (only payment by credit card or EFTPOS are accepted). Alternatively, you may make the payment through internet banking.							
Alternatively, you may make the payment through internet banking. This payment can be made on the University of Auckland Payment System here.							
Please attach the receipt to the application form (receipt from AskAuckland Central, a bank statement or a screenshot of bank transfer receipt).							
Signat	ure: Date:						
Checklist. Please tick:							
	I have selected a category for my application.						
	I have completed all sections of the application form.						
	I have completed an AS-31 declaration form and handed in the original hard copy to AskAuckland Cer posted it to Examinations Office: Private Bag 92019, Auckland 1142, New Zealand						
	I have attached evidence documents to support the application.						
	I have attached a copy of my exam timetable.						
	I have made payment and attached a receipt.						
I am submitting the application form before the deadline (one month before the first affected exa							
	Payme or EF Altern Unive Please screens						

STEP 9 Submit the application form:

Please scan the application form and all other documents (not including the Statutory Declaration Form) in one pdf file and email it to alternative_exams@auckland.ac.nz at least four weeks before the first day of the affected examination period. The original hard copy of the Statutory Declaration Form must be handed to AskAuckland Central in person or posted to Examinations Office: Private Bag 92019, Auckland 1142, New Zealand. Late applications will not be accepted. Applications with insufficient supporting documents will be rejected or declined. The application fee is non-refundable.

Please note:

- 1. Applications must be made in writing on this form.
- 2. Personal details required:
 - a list of courses affected
 - the reason for the application, including documentary evidence to support your claim
 - current contact details for a person at the nominated venue (must be a university) who will be able to arrange invigilation for your examinations
 - the alternative venue should be a university close to your location; you will need to contact them directly and ask them whether they are able to host your exams on the date and time listed in your timetable
- 3. Charges made by the University of Auckland are as follows:
 - for overseas venues: \$175.00 for the first course, \$30.00 for each subsequent course
 - for New Zealand venues: \$140.00 for the first course, \$30.00 for each subsequent course
- 4. All costs incurred such as supervisor costs, etc. are your responsibility and you will be advised of these amounts by the invigilating centre. These costs are additional to the charges paid to the University of Auckland.
- 5. We will endeavour to arrange invigilation of your examination through contact with your chosen venue.
- 6. You should always liaise with the Examinations Office prior to making an application.

OFFICE USE ONLY						
Approval Recommended	Not recommended	Application Approved Declined				
Signature		Signature				
Date		Date				

AskAuckland Central: Out of Centre Exams, Speed Code: 107



AS-31

Examinations Office Academic Services The ClockTower Private Bag 92019, Auckland 1142 Email: alternative_exams@auckland.ac.nz

Declaration for Students Sitting Examinations Out of Time

STEP 1	Surname:		ID Number:	
	First name:		Phone:	
			Email:	@aucklanduni.ac.nz
STEP 2	2 To be com	npleted by the student in the pre	esence of a Justice of the Pe	eace or solicitor
			CLARATION	
•				(Name)
OF				(Address)
				(0 ")
			- d b- l	(Occupation)
•	,		•	and that no relevant information has been
WILLILIE				g a candidate for an examination(s) towards EGREE and having applied to sit the paper(s)
				than that set down, do hereby declare THAT
(i)	in the case of my sit		ed time, I will not discuss the conte	ent of this examination with any person after
(ii)	-	tting the examination after its scheduled will not discuss the content of the examin		-
AND I	make this solemn de	eclaration conscientiously believing the s	same to be true and by virtue of th	ne Oaths and Declarations Act 1957.
DECLA	ARED AT			
this		day of		20
Signe	d (student)			
Declar	red this day before m	ne		
Justice	e of the Peace or soli	icitor stamp		

STEP 3 Return the <u>original</u> of this form by post to the Examinations Office (Private Bag 92019, Auckland 1142), or <u>in person</u> to AskAuckland Central (Ground Floor, Alfred Nathan House, City Campus)

Conduct in Examinations

Cheating or any other dishonest practice in examinations cannot and will not be tolerated. It attracts severe penalties, including heavy fines, failure in papers and suspension from the University. Cheating is a serious offence.