

If you have a disability or a learning difficulty, the usual format of training delivery or assessment may not be suitable and in certain circumstances reasonable adjustments may need to be made. ICA will endeavour to ensure that their delivery of training is accessible to all, and awards accurately reflect learner attainment. ICA will endeavour to accommodate the needs of learners with a particular assessment requirement, according to the individual's circumstances, with the intention that such learners are not disadvantaged.

To make an application for reasonable adjustments, all learners are required to complete and return this form with accompanying medical evidence detailing the nature of the condition.

Please complete in **BLOCK CAPITALS**

1. Personal details

Title:

First name(s):

Last name:

Candidate No.:

Email address:

Course/Qualification studying:

2. Reasonable Adjustment(s) required:

Please indicate the elements of the course / qualification you are applying for Reasonable Adjustments for*:

Learning content:*
 (Learning content is delivered electronically via ICA's learning hub. The learning content consists of multi-media format for example PDFs -screen reader friendly, video with closed captions)

Live events:*
 (Virtual classroom – to ensure the best experience learners are recommended to enable cameras and microphones during the session.)

Virtual Classroom Face to Face Workshop

Assessment:*
 (Assessment formats are dependent on course/qualification please check your course format for more details.)

- Online timed multiple choice assessment
- Online timed written assessment
- Assignment or other written submission (reflective journal)
- Oral Assessment

Submit this form to the ICA Learning support team by going to the ICA website <https://www.int-comp.org/help-and-support/contact-us/> and completing the webform.

Once you receive an email with the case number you can reply to that email attaching this form and any evidence you are supplying in support of your Reasonable Adjustments needed.

Please use this space to detail the nature of the adjustments required in line with your supporting medical evidence.

3. Declaration

I have read and understood the ICA Reasonable Adjustments Policy

I enclose a copy of a medical report to support application.

I understand that I am required to give ICA at least two weeks notice for the reasonable adjustment to be considered, and if made after this time it may not be possible for ICA to put the necessary arrangements in place.

Signature:

Date:

ICA are committed to protecting the privacy and security of your personal information. By signing this document, you confirm that you have read, understood, and agree to [ICA's Privacy Policy](#) which describes how ICA collect and use personal information about you in accordance with data protection law.