

Reasonable adjustments form



Training provider name:

**Training provider
centre number:**

Delegate name:

Date:

Course title:

**Assessment that the
reasonable adjustment
would link to:**

Course reference:

Course dates:

**Assessment requirements
eg written / practical
examination:**

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Reason for adjustment

Any supporting evidence

**What adjustments will
be made to support
the delegate?**

**Name of person requesting
the adjustment:**

Date request received:

**Position of the person
requesting the adjustment:**

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Trainer name:

Date trainer informed:

Declaration: By signing this form the Training provider agrees to the statements below:

- **the information provided on this form is accurate**
- **the adjustment(s) that have been proposed will not comprise the assessment validity or reliability and will not give the delegate an unfair advantage over other delegates completing the same course**
- **the delegate's knowledge, skills and understanding will still be assessed, and the delegate will still be able to demonstrate the assessment criteria required by IOSH if the proposed adjustments are granted by IOSH.**

Please retain a copy of this form for your records.



About IOSH

The Institution of Occupational Safety and Health (IOSH) is the Chartered body for health and safety professionals. With 50,000 members in more than 130 countries, we're the world's largest professional health and safety organisation.

We set standards and qualifications, and support, develop and connect our members and others with resources, guidance, events, and training. We're the voice of the profession and campaign on issues that affect millions of working people.

IOSH was founded in 1945 and is a registered charity with international NGO status.

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