

ACADEMIC CONCESSION SELF-DECLARATION FORM

Before completing this form, please ensure you have read the academic concessions website www.sfu.ca/students/academic-success/academic-concessions

This form is to be completed in place of a doctor's note for instances of minor illness (normally 1-5 days) where:

- a) you have spoken to your instructor about receiving an academic concession for your absence; and
- b) your instructor requires documentation

If you are already registered with the Centre for Accessible Learning and your concession is related to your registered medical condition or disability, contact your Disability Access Advisor first at www.sfu.ca/students/accessible-learning/contact-us

PERSONAL INFORMATION

Name _____ Student number _____

Email _____ Program _____

COURSE INFORMATION

Course (ex. BISC 101) _____ Section (ex D100) _____ Term _____

Instructor Name _____

Is this your first time using this form for this course this term? Yes No

If no, provide the date of previous use _____

Will you be requesting concession in another course(s) for the same reason? Yes No

If yes, list the other courses _____

DECLARATION OF MISSED COURSEWORK

Reason for absence _____

Description and title of missed coursework (if applicable) _____

Anticipated dates of absence _____

AGREEMENT OF STUDENT RESPONSIBILITIES

By submitting this self-declaration form, I confirm and acknowledge that:

- The details and report of my request as set out in this declaration are true and accurate.
- The submission of false information on this Academic Concession Self-declaration Form is considered a form of academic misconduct, and **will be** investigated and penalized accordingly.
- The submission of this declaration does not ensure the granting of the academic concession. The authority to grant a concession rests with the instructor.
- SFU reserves the right to request additional supporting documentation, and may require more detailed documentation in the event of multiple requests or extended absences.

Student signature _____ Date _____

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

The information on this form is collected under the authority of the University Act (RSBC 1996, c. 468) and is needed to adjudicate your request for an academic concession. If you have questions about the collection, use and disclosure of this information, please contact the Associate Registrar, Information, Records, and Registration at 778 782 6930 or reginfo@sfu.ca.