

## Request for an individual candidate to move to the non-exam route

- Please complete this form in the working language of your school (English, French or Spanish).
- Attach supporting documentation where appropriate, including a translation if applicable.
- Send to the IB Global Centre, Cardiff ([support@ibo.org](mailto:support@ibo.org)) with the subject line 'individual route change'.

Candidate name:

Examination session:

School code:

Candidate session number:

Personal code:

Subject and level	Has new IA been submitted for this session?	Has a predicted grade been submitted for this session?	Is this the sole candidate in your cohort taking this subject and level?

Please indicate your reason for requesting an individual route change and provide further details.

<b>The candidate is unable to travel to school for their exams due to travel restrictions and there is no possibility of arranging an alternative venue for them</b>
<i>Please give details, including details of what steps the school has taken to secure an alternative venue</i>

<b>The candidate is required to quarantine due to Covid-19 and it is impossible to arrange alternative invigilation for them, for example at their home</b>
<i>Please give details, including details of why alternative invigilation is not possible</i>

	<b>The candidate is unwell and neither emergency rescheduling nor alternative invigilation will enable them to sit their exams</b>
	Supporting evidence must be provided if a request is being made on this basis. Please check the box to confirm you have shared this with the IB.
<i>Please give details including details of why emergency rescheduling / alternative invigilation are not viable</i>	

	<b>A reason not specified here</b>
<i>Please give full details of the situation and other mitigation options that have been investigated</i>	

<i>Please use this space to add any further details relevant to your request</i>

*To be completed by the coordinator or head of school:*

I confirm that to the best of my knowledge the information provided in this form is accurate and I fully support the application.

Name:

Position:

Date:

### **Supplementary guidance on the Programme Resource Centre**

[FAQs for the May 2021 DP and CP examination sessions](#)

[Adverse Circumstances Policy \(Only applicable to the examination route for the May 2021 session\)](#)

[Adverse Circumstances Policy \(Only applicable to the non-examination route for the May 2021 session\)](#)

[Emergency rescheduling guide for candidates who are too unwell to sit an examination](#)