**UKRI Funded Student - Request for additional funding due to short term illness**

**Sharing of Information**

Schools/Colleges will only share information regarding your request with staff who have a legitimate need to access the information in order to consider your case or to provide you with support in relation to the issues raised. We will retain the information for UKRI audit purposes and in line with the privacy notice - The Special Circumstances Study Privacy [Notice](file:///C:\Users\Lorna\Downloads\%20https\www.ed.ac.uk\files\atoms\files\specialcircumstancesaisconcessionsloaprivacynotice.pdf).

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| --- | --- | --- | --- |
| Student Surname |  | Student Forename |  |
| School |  | UUN |  |
| Programme of Study |  | Year of Study |  |
| UKRI Funding Body |  | Total length of illness (weeks) |  |
| First date of short-term illness | Click here to enter a date. | Last date of short-term illness | Click here to enter a date. |
| *Please provide details of the short-term illness* | | | |
|  | | | |

**Do not include medical certificates with this email. Please email this completed form to** [**pgawards@ed.ac.uk**](mailto:pgawards@ed.ac.uk)

**The Postgraduate Research Student Office will confirm how to share the medical information which is required and then the outcome of your request. Your supervisor will be included in correspondence confirming the amount of any additional funding awarded.**