

Application for Examination Permission Submission

1. Application for Examination Rescheduling Due to Personal Circumstances

To,
The Principal,
[Name of the Institution],
[Address of the Institution],
[City], [Postal Code]

Subject: Application for Examination Rescheduling Due to Personal Circumstances

Respected Sir/Madam,

I, [Your Full Name], am a student of Class [Your Class] at your esteemed institution, bearing Roll Number [Your Roll Number]. I am writing this application to request a rescheduling of my examination scheduled on [Date of Examination] due to personal circumstances.

Unfortunately, I am facing a family emergency that requires my immediate attention and presence. My [Relation], who is critically ill, has been hospitalized, and I must travel to [City/Town] to be with my family during this difficult time. Consequently, it will not be feasible for me to appear for the examination on the given date.

Considering the situation, I request you to kindly reschedule my examination to a later date or provide an alternate arrangement to ensure that my academic progress is not hampered. I understand the inconvenience caused and assure you that I will be diligent in catching up with the syllabus and attending the alternate examination.

I hope you will understand my predicament and grant my request. I shall be grateful for your consideration and support in this matter.

Thanking you,

Yours sincerely,

[Your Full Name]

Class: [Your Class]

Roll Number: [Your Roll Number]

Date: [Current Date]

2. Request for Special Accommodations in Examination through Application

To,
The Principal,
[Name of Institution],
[Address of Institution],
[City, Pin Code]

Subject: Request for Special Accommodations in Examination

Respected Sir/Madam,

I, [Your Name], a student of class [Your Class] in your esteemed institution, kindly request your kind attention to my need for special accommodations during the upcoming examinations. I am registered under roll number [Your Roll Number] and have been a diligent and committed student throughout my academic journey.

Unfortunately, I have been diagnosed with [Name of Disability or Medical Condition], which hampers my ability to perform optimally under normal examination conditions. Due to this condition, I face substantial difficulty in reading, writing, or concentrating for extended periods.

In light of these challenges, I humbly request you to grant me the following accommodations during the examinations:

1. Extra time of [Specify Duration] in each examination.
2. Permission to use assistive devices such as [Specify Devices, if applicable].
3. A separate examination room with minimal distractions, if feasible.

These accommodations are essential for me to fairly demonstrate my knowledge and understanding of the subjects without being unfairly disadvantaged by my medical condition.

I have attached the necessary medical documents and a letter from my treating physician, [Doctor's Name], outlining the nature of my condition and the need for the special accommodations.

I earnestly hope that you will consider my request and provide me with the necessary support to ensure my academic success. I assure you that I am committed to working hard and achieving the best possible results, and I am grateful for your understanding and assistance in this matter.

Thanking you in anticipation.

Yours sincerely,

[Your Name]

Class: [Your Class]

Roll Number: [Your Roll Number]

Contact Number: [Your Contact Number]

Date: [Date of Application]

3. Application to Attempt Examination in an Alternative Language

To,
The Principal,
[School/College Name],
[Address],
[City],
[Date]

Subject: Application to Attempt Examination in an Alternative Language

Respected Sir/Madam,

I, [Your Name], a student of Class/Year [Class/Year] in your esteemed institution, kindly request your permission to attempt my upcoming examination

in an alternative language. My Roll Number is [Roll Number], and I am currently pursuing [Subject/Stream].

Though I have been studying the prescribed subjects in English, I am more proficient and comfortable in expressing my knowledge and understanding in [Alternative Language]. Consequently, I believe that attempting the examination in [Alternative Language] would enable me to perform better and secure good grades.

I kindly request you to consider my application and grant me permission to take the examination in [Alternative Language]. I assure you that I will abide by any rules and regulations pertaining to this request and will be solely responsible for any consequences arising from this decision.

Thanking you in advance for your understanding and support.

Yours sincerely,

[Your Name]
[Roll Number]
[Class/Year]
[Contact Number]

4. Submission of Examination Fee Waiver Application for Financial Hardship

To,
The Principal,
[Name of the Institution],
[Address],
[City], [Postal Code]

Subject: Submission of Examination Fee Waiver Application for Financial Hardship

Respected Sir/Madam,

I, [Your Name], am a student of Class [Your Class] in your esteemed institution. I am writing to request a waiver of my examination fee due to financial hardship faced by my family.

My father is the sole breadwinner of the family and his income is insufficient to cater to the needs of our family. Recently, he has been facing a financial crisis due to the loss of his job amidst the ongoing pandemic. As a result, we have been finding it difficult to pay the examination fee for the upcoming exams.

I have always been a diligent student and have maintained good academic records throughout my time at this institution. It is my earnest desire to continue my studies without any hindrance, and for that, your support in waiving my examination fee would be invaluable.

I kindly request you to consider my situation and grant me a full/partial waiver of the examination fee. I have attached the necessary documents to support my claim of financial hardship.

Thank you for considering my application. I look forward to your positive response.

Yours sincerely,

[Your Name]

[Your Class and Section]

[Roll Number]

[Date]

5. Application for Examination Permission due to Extended Medical Leave

To,

The Principal,

[School/College Name],

[Address],

[City], [State], [Pin Code]

Subject: Application for Examination Permission due to Extended Medical Leave

Respected Sir/Madam,

I, [Your Name], am a student of Class/Year [Class/Year Name] in your esteemed institution, bearing Roll No. [Roll Number]. I am writing this application to seek your kind permission to appear for the upcoming examinations, as I have been on an extended medical leave.

Due to a severe illness, I had to take medical leave from [Start Date] to [End Date] for which I had already submitted the required medical documents to the school/college office. My absence from classes has led to a shortfall in my attendance, which does not meet the minimum requirement to appear for the examinations.

However, during my medical leave, I have put in consistent efforts to keep up with my studies and have completed all the required assignments and projects. I believe that I am well-prepared for the examinations and am confident in my ability to perform well.

In view of the above, I humbly request you to kindly grant me permission to appear for the upcoming examinations despite my insufficient attendance. I assure you that I will work hard and maintain the reputation of our esteemed institution.

Thanking you in advance for your kind consideration and support.

Yours faithfully,

[Your Name]

Class/Year: [Class/Year Name]

Roll No.: [Roll Number]

[School/College Name]

[Contact Number]

[Email Address]