

## Application for special support in relation to the National Examinations

The outcome of the application, as entered on this form, must be registered in the *Skólagátt* data portal operated by the Directorate of Education.

### The school retains this application form on file

Please note that the application may contain sensitive personal information and must therefore be filed securely.

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Student's name

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National ID Number (*kennitala*)

Name of class

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School

**Special support requested in relation to:**

**Subject:**

- Icelandic
- Mathematics
- English

- Decision to provide the student with reading assistance on the test.
- Decision to provide the student with support that does not need to be notified to the Directorate of Education (such as taking the test in a room with only a few other students or having access to a glossary or the services of an interpreter).
- Discussion of other special support; decision for the school to seek the Directorate of Education's advice on this (such as allowing an examination time beyond pre-allotted time or providing rest periods during the test).

**Do not** send diagnosis data to the Directorate of Education.

**Main points discussed during consultation between the school and the parents/guardians:**

**Action decided by the headteacher and the parents/guardians:**

I confirm the above with my signature:

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Signature of Parent/Guardian

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Date

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Signature of Headteacher