



Pre-Assessment Form

The information below is really helpful for your assessor to have in advance of the assessment. All information supplied will be treated as confidential.

Once completed please return via e-mail to admin@aimassessments.co.uk, or by post to Aim Assessments

The Tannery

Leeds West Yorkshire LS3 1HS	
Full Name:	
Home Address:	
	Post Code:
Term Address (if known):	
Home Telephone:	Mobile Telephone:
Email Address:	
Date of Birth:	
Name of funding Body (e.g Student	Finance England):
Funding Body Reference Number:	
Names of University or College of H	igher Education where you are / will be studying:
Full title of course:	
Length of course (in years)	which year are / will you be in? year
Please tick the box below that appl ☐ Undergraduate Part time	lies to your course: Undergraduate Full Time
☐ Postgraduate Taught Full Time	☐ Postgraduate Taught Part Time
☐ Postgraduate Research Full Time	Postgraduate Research Part Time "Top Up"

Please provide the contact details of the Disability Support Service at your university or college	
Full Name:	
Telephone:	
Email Address:	
Information on your disability and how it affects your learning	
How would you describe your disability or diagnostic/medical condition?	
Describe how it affects your ability to study?	
What support strategies have been implemented previously in relation to your disability?	
Please give any other information you would like to add about your disability/condition in relation to your studies.	

Thank you for completing the pre-assessment form. Please return it to the e-mail or address at the top of the form. If you have not already done so, please also remember to enclose copies of any previous reports to support your application. Without these documents we cannot fully assess your needs.