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**IMPACT STATEMENT**

|  |
| --- |
| **Please describe any physical injury or emotional harm you have suffered, including any medical treatment you have received and the impact on your lifestyle** |
|  |
| **Please describe any loss of, or damage to, property** |
|  |
| **Please describe any other way in which you have been affected by these events** |
|  |

**DECLARATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **I declare that the information given above, is accurate and true to the best of my knowledge.**  **I understand that this form, and the evidence submitted with it, will constitute part of the full case file, which will be made available to appropriate parties on request and shared in line with the relevant Communication Plan[[1]](#footnote-1)[1] and Privacy/Fair Processing Notice[[2]](#footnote-2)[2].** | | | |
| **Signed:** |  | **Date:** |  |

*Once completed, please submit this form to* [*studentcasework@southwales.ac.uk*](mailto:studentcasework@southwales.ac.uk)

1. [1] Communication plans for each area of casework can be found here: https://registry.southwales.ac.uk/student-regulations/student-conduct/ [↑](#footnote-ref-1)
2. [2] <http://uso.southwales.ac.uk/ig/dp/> [↑](#footnote-ref-2)