

BURPENGARY STATE SECONDARY COLLEGE



Access Arrangements and Reasonable Adjustments (AARA)

Application Form for year 11 and 12

Complete this form if you have experienced personal injury, illness, grief, loss or trauma or have a diagnosed disability which may be a barrier to your performance in assessment.

It is submitted to the Year Level DP for consideration. In some cases, the school does not make the final decision and applications are forwarded to the Queensland Curriculum and Assessment Authority (QCAA) for approval. AARAs are reviewed annually.

The following table reflects the notification timeline requirements as set by QCAA. In general however, AARA's should be in place as soon as possible as assessment cannot be adjusted retrospectively.

What	When required by	In relation to	Approved by
For General and Applied External Assessment in Units 3 and 4:	By the beginning of term 1 of Year 12	Alternative format papers such as large print, braille.	QCAA Approval required.
For General and Applied External Assessment in Units 3 and 4:	By the end of term 1 of Year 12 for existing long term or chronic conditions	Change to venue, use of reader or scribe, rest breaks, use of computer, extra time, teacher aide assistance, and assistive technology such as speech to text applications.	QCAA Approval required.
For General and Applied External Assessment in Units 3 and 4:	By the beginning of term 3 of year 12 for short term conditions or temporary injuries	Change to venue, use of reader or scribe, rest breaks, use of computer, extra time, teacher aide assistance, and assistive technology such as speech to text applications.	QCAA Approval required.
For General and Applied Internal Assessment in Units 3 and 4:	By the end of term 3 of year 11	For rest breaks and additional time.	QCAA Approval required.
For General and Applied Internal Assessment in Units 3 and 4:	By the end of term 3 of year 12	All other AARA's.	School approval and reported to QCAA
For General and Applied Internal Assessment in Units 1 and 2:	As soon as possible	All access arrangement and reasonable adjustments	School approval and reported to QCAA

STUDENT NAME:	YEAR LEVEL:	STUDENT EMAIL: @eq.edu.au
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STUDENT STATEMENT

1. I have (please tick the relevant box/es.):

- A long term or recurrent medical or psychiatric condition or disability
- A serious, short term medical or psychiatric condition
- A learning, sensory, physical, psychological or other disability or disorder
- Experienced recent and/or significant grief, loss or trauma

2. Name of my condition, disability or significant event causing grief, loss or trauma:

3. This affects my ability to perform in assessment because:

4. The school is already aware of my condition, disability or significant event. Yes No Unsure

Student's Signature: _____ Date: _____

VERIFYING EVIDENCE

Only applications with verifying evidence will be considered. It is the student's responsibility to organise the verifying evidence with the exception of students with a verified disability.

Current Verified Disability as listed in OneSchool (Check with Special Education Unit if unsure) OR

Attached is medical report from a general practitioner, medical specialist or psychologist who is not related to the me or employed at Burpengary State Secondary College stating:

- Diagnosis of disability and/or medical condition
- Date of diagnosis
- Date of occurrence or onset of the disability and/or medical condition
- Symptoms, treatment or course of action related to the disability and/or medical condition
- Information about how the diagnosed disability, impairment and/or medical condition affects the student participating in assessment, particularly timed assessment when considering external assessment
- Professional recommendations regarding AARA OR

Attached is a funeral notice or equivalent demonstrating impact on the due dates OR

Attached is a third party signed statement (not the student/parent/carer) stating:

- The nature of the event causing significant and/or recent grief, loss or trauma
- How the event and subsequent grief, loss or trauma affects the student participating in assessment, particularly timed assessment when considering external assessment OR

Other, please specify: _____

POSSIBLE EXAMPLES OF AARAs	
Alternative format papers	Examples include: <ul style="list-style-type: none"> • braille • A4 to A3 enlargement • electronic format • large print papers, e.g. N18, N24, N36 • black-and-white materials.
Assistance	Examples include: <ul style="list-style-type: none"> • a teacher aide assisting with manipulation of equipment and other practical tasks • a supervisor using the student's name in reading assessment instructions, providing support and reassurance, and prompting the student to start or continue writing / undertaking the assessment task.
Assistive technology	Examples include: <ul style="list-style-type: none"> • amplification system • speech-to-text application • magnification application. <p>The types of assistive technology that the student may use to complete assessment will depend on variable factors, including the nature and severity of the student's disability and/or impairment and the functional impact related to the type and purpose of the assessment instrument.</p>
Bite-sized food	The student may take a sufficient quantity of bite-sized food in a clear container into the assessment room. Food must be unobtrusive in nature, i.e. not crunchy, strong-smelling or wrapped in noisy packaging.

Comparable assessment	An alternative comparable assessment that has not previously been administered to students in the subject cohort, may be administered on a different date.
Extension	An extension to the due date for submission or completion of an: <ul style="list-style-type: none"> • extended response project <i>or</i> • performance <i>or</i> • non-examination.
Extra time	Additional working time at the rate of five minutes per half hour of examination assessment time.
Physical equipment and environment	Examples include: <ul style="list-style-type: none"> • specialised desk or chair • cushion or pillow • crutches • heat or cold pack • towel • lighting • ventilation • temperature • other physical aid.
Scribe	Work with someone who transcribes the student's verbal response or directions during the assessment.
Vision aids	Examples include: <ul style="list-style-type: none"> • coloured transparency overlay • different lighting • other vision aids.

SCHOOL STATEMENT

(To be completed by Year Level Deputy, in consultation with specialised school staff such as HOSES, GO, HOD Wellbeing.)

1. Describe how this medical condition/disability or impact event, is currently being supported.

2. Does this student have a Personalised Learning Plan because of this medical condition/disability or impact of an event?
YES NO
3. Consultation occurred through
 - Informal/formal meetings with special staff. State role _____
 - Informal/formal meetings with student's parent/carer

SCHOOL DECISION: (To be completed by the Deputy Principal after consultation completed. NOTE: The school is unable to make the final decision when the AARA impacts General Subjects in Unit 3 and 4 and requires QCAA Approval)

DATE APPLICATION RECEIVED:

(Where possible, decision will be made within 7 days upon receipt of verifying evidence)

This application will impact on assessment in

General Subjects Unit 1 and/or 2

General Subjects Unit 3 and 4 This will also require Principal Reported or QCAA Approved

Applied Subjects

VET Subjects

Australian Curriculum Subjects

APPLICATION IS SUPPORTED <input type="checkbox"/>				APPLICATION IS NOT SUPPORTED <input type="checkbox"/> Reason:		
AARA Details:						
<input type="checkbox"/> How the instrument is presented to the student	<input type="checkbox"/> How the student responds to the instrument	<input type="checkbox"/> Time allowed	<input type="checkbox"/> Scheduling	<input type="checkbox"/> Environment	<input type="checkbox"/> Mode	<input type="checkbox"/> Audience
Details if applicable:	Details if applicable:	Details if applicable:	Details if applicable:	Details if applicable:	Details if applicable:	Details if applicable:

NOTIFICATION/DOCUMENTATION:

REGARDLESS OF OUTCOME

Student notified of outcome via email

Parent/Carer notified of outcome via email

Teachers notified of outcome via email

IF SUPPORTED

Documented as "Support/ Support Provision" in OneSchool.
 Provision Name: AARA
 Provision Type: School
 Provision Target Area: Curriculum
 Contact Person: Person who made the decision
 Contributors: All involved in considering the information
 Not restricted

Application scanned and attached in Support Provision.
 Verifying evidence saved under Support/ Referral and Report with Restriction Level 1 or 2 or 3 depending on potential sensitive nature of information.

NOT APPROVED

Documented as "Contact" in OneSchool

Deputy Principal Signature: _____ Date: _____

ORIGINAL APPLICATIONS ARE SUBMITTED TO THE OFFICE FOR INCLUSION IN STUDENT'S FILE.
 COPY OF APPLICATION IS SUBMITTED TO CLASS TEACHER FOR INCLUSION IN STUDENT'S ASSESSMENT FILE.