

Yr 7- 9 Student AARA Application

Access arrangements and reasonable adjustments (AARA)

A student may complete this statement as part of an application for AARA. The information provided needs to be current and relate to the relevant assessment period.

Information provided in this statement is treated in the strictest confidence and is only used for the purpose of determining the AARA application. Fill out all fields and sign the second page.

Student name:			Year Level:							
School:	Pacific Pines State High									
If anything for a			Draft due date:							
If applying for a short term AARA, please enter subject/s:			Final due date:							
subject/s.			Exam absence date:							
If applying for a long term AARA: please circle	Cognitive	Physical	Sensory	Social/Emotional						
Tell us about your medical condition, circumstance, disability or impairment (please tick or comment).										
 □ Vision impairment please list □ Intellectual Disability □ Autism Spectrum Disorder □ Speech and Language Impairment □ Hearing impairment □ Physical impairment please list □ Medical condition please list □ Mental health condition please list □ Illness please list □ Learning Disorder □ Other e.g. attending funeral, accident, short term illness or physical injury (please outline in the comment section below) 										
Please comment if required										

The information you provide on this form will be used for access arrangements and reasonable adjustments (AARA), which are designed to assist students with disability, impairment, medical conditions or other circumstances that may be a barrier to their performance in assessment. These procedures for these arrangements and adjustments are set out in the QCE and QCIA policy and procedures handbook 2019 v1.0. Personal information will be accessed by authorised QCAA staff and handled in accordance with the Information Privacy Act 2009. Information held by the QCAA is subject to the Right to Information Act 2009.





Student details



What adjustment/s are you applying for (please tick or comment):									
Extension to the due date for submission or completion of an assessment piece Additional time (5 mins per 30 mins) for exams Varied seating — single student supervision Varied seating — small group supervision Varied seating — preferential seating within the classroom Alternative format paper — enlarged print or braille Teacher assistance — provide support and reassurance and prompts to start and continue Teacher assistance with manipulation of equipment and other practical tasks Assistive technology — e.g C-pen, speech to text application Diabetes management — bite size food, BG monitoring equipment, additional time to manage aspects of this condition Rest breaks (5 mins per 30 mins) taken at any time during the assessment Access to toilet Assistive technology e.g amplification system, speech to text application, magnification application Bite-sized food in clear container Camparable assessment adminsiterd on a different date Computer with approved software Drink in a clear bottle (other than water) for medical purposes Individual instructions Medication that has been prescribed and is in a clear container Physical equipment and environment e.g. specialised desk or chair, cushion, crutches, heat or cold pack, towel, lighting, ventilation, temperature, other physical aid Reader Scribe Vision aids e.g different lighting, coloured transparency overlay, other vision aids Other — based on the functional impact of a student's condition									
Please	comment if required								
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Stude	ent signature:				Date:	/	/		
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	nt/carer signature udent is under 18):				Date:	/	/		

Electronic signature: If this document is completed electronically, by completing the fields above and inserting the signatory's name, the signatory agrees that this becomes a signed document pursuant to section 14 of the *Electronic Transactions (Queensland) Act 2001.*