



## Access Arrangements and Reasonable Adjustments (AARA) Application Form

**Instructions for AARA applications:**

- Refer to Dalby State High School's *Senior Assessment Policy* prior to submission of the application.
- This application must be submitted as soon as practical to meet school and QCAA timelines.
- Granting of AARA is at the discretion of the Principal or Principal's Delegate and approved only when:
  1. *the student successfully meets eligibility criteria;*
  2. *the student's circumstance provides a barrier to demonstrate their learning, knowledge and skill in the assessment instrument; and*
  3. *evidence exists to justify an AARA application.*

**STEP 1: This section to be completed by the student requesting AARA prior to, or during an appointment with the Guidance Officer.**

<b>Date of application:</b>		<b>Year:</b>	<input type="checkbox"/> 11	<input type="checkbox"/> 12
<b>Student's name:</b>		<b>Unit:</b>	<input type="checkbox"/> 1	<input type="checkbox"/> 2
<b>Assessment due date:</b>		<b>Subject:</b>	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<b>Assessment instrument: (IA number for Units 3 &amp; 4)</b>		<b>Teacher:</b>		

**Reason for application:**

- eligible impairment
- medical condition
- absence from a scheduled exam
- other circumstance

**Eligibility criteria** (select from the conditions and categories below):

Time-frame of condition	Category	
<input type="checkbox"/> Temporary	<input type="checkbox"/> Cognitive	<input type="checkbox"/> Physical (including injury or illness)
<input type="checkbox"/> Intermittent	<input type="checkbox"/> Sensory	<input type="checkbox"/> Other:
<input type="checkbox"/> Permanent	<input type="checkbox"/> Social/emotional	

**Statement explaining reason for application:**

**Supporting evidence** (*attach to application*):

- Medical documentation (e.g. certificate / report)
- Evidence of verified disability
- Official notices (e.g. death certificate)
- Legal documentation (e.g. police report)
- Statutory declaration
- Other:

**Student and Parent/Carer Acknowledgement:**

We have discussed the grounds for this application and we request additional support to minimise barriers to demonstrate learning, knowledge and skill in the assessment stipulated above. We acknowledge that this is a request only and is subject to approval from the Principal or Principal's Delegate in line with Dalby State High School's Senior Assessment Policy, and QCAA policy and procedures.

**Student signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Carer signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guidance Officer Use Only:**

**Date:**

- G.O. to manage AARA in consultation with HODs (eg Long term AARA or ongoing consideration required)
- Student to submit AARA Application with the relevant Curriculum Head of Department for consideration (See STEP 2 over page)



**STEP 2: This section to be completed by the HOD in consultation with subject teacher.**

I have checked classroom progress and the notes and/or draft completed by the student. Yes  No  N/A

Supporting evidence attached: Yes  No  N/A

I am satisfied that this application meets Dalby State High School's Senior Assessment Policy requirements.

Approved: Yes  No

**Type of AARA applied (circle):**

Principal Reported for Summative Internal and External Assessment	Bite-sized food	Drink	Diabetes management	Individual instructions
	Medication	Physical equipment and environment	Varied seating	Vision aids
	Comparable assessment*	Extension*	*Only applicable to internal assessment:	
Principal-Reported for Summative Internal Assessment QCAA-Approved for Summative External Assessment	Alternative format papers	Assistance	Assistive technology	Computer
	Reader	Scribe	Variations to venue	
QCAA-Approved for Summative Internal and External Assessment	Extra time	Rest breaks		

**Details of AARA:**

HOD signature: \_\_\_\_\_

Date: \_\_\_\_\_

**STEP 3: This section to be completed by the Principal or Principal's Delegate (if applicable).**

Supporting evidence attached: Yes  No  N/A

I am satisfied that this application meets Dalby State High School's Senior Assessment Policy requirements.

Approved: Yes  No

**Comments (if applicable):**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**STEP 4: This application form is to be returned to the Guidance Officer as soon as possible.**

Administration Use Only:	
Date entered on OneSchool:	Entered by:
<input type="checkbox"/> Student notified of approval/non-approval and arrangements	<input type="checkbox"/> Application actioned in AARA Portal (Units 3 & 4 ONLY)
<input type="checkbox"/> Original (and supporting documentation) placed in student file	