



MacGregor State High School
Access Arrangements and Reasonable Adjustments (AARA)
Senior (11/12) AARA Application Form – Short Term

STUDENT NAME:	YEAR LEVEL:	DATE:
	11 / 12	

Reason for Application (select from the reasons below):	
<input type="checkbox"/> Extension of time for assessment instrument/s due to absence <input type="checkbox"/> Absence from a scheduled exam	<input type="checkbox"/> Access arrangement to make assessment more accessible <input type="checkbox"/> Reasonable adjustment for student with disabilities

Eligibility criteria (select from the conditions and categories below):			
Timeframe	Category		
<input type="checkbox"/> Temporary (Short Term) <input type="checkbox"/> Intermittent (Short/Long Term) <input type="checkbox"/> Permanent (Long Term)	<input type="checkbox"/> Cognitive <input type="checkbox"/> Physical <input type="checkbox"/> Representative Sport (early completion)	<input type="checkbox"/> Sensory <input type="checkbox"/> Social/Emotional	<input type="checkbox"/> Illness <input type="checkbox"/> Misadventure (e.g. Bereavement)

Reason for application: Information regarding how the student’s ability to complete assessment is affected

SUPPORTING EVIDENCE AND DOCUMENTATION: Only applications with third party, supporting evidence will be considered. It is the parents/carers and student’s responsibility to organise the supporting evidence. See Senior AARA process on the school website.
<input type="checkbox"/> Current Verified Disability with an endorsed Educational Adjustment Plan (EAP) OR <input type="checkbox"/> Medical documentation from a general practitioner, medical specialist or psychologist who is not related to me (For External Assessments Year 12 only use the Medical Report. For template_see AARA process) OR <input type="checkbox"/> A funeral notice or equivalent demonstrating impact on the student on the due dates/period of impact OR <input type="checkbox"/> A third party signed statement (not the student/parent/carer) OR <input type="checkbox"/> Other, please specify: _____

Parent / Caregiver Acknowledgement	
I have discussed the grounds for this application with my child and I support the request for additional support. I acknowledge that this is merely a request and is subject to approval from the Deputy Principal in line with school and Queensland Curriculum and Assessment Authority procedures.	
STUDENT SIGNATURE AND DATE	PARENT/CAREGIVER SIGNATURE AND DATE
Date: ___/___/___	Date: ___/___/___

STUDENT CHECKLIST:	<input type="checkbox"/> AARA application completed <input type="checkbox"/> Medical/Relevant documentation attached <input type="checkbox"/> Submit completed AARA application and supporting documents to Senior Schooling (E Block) or via email to: aara@macgregorshs.eq.edu.au using the subject line: Senior AARA Application	<input type="checkbox"/> Student signature <input type="checkbox"/> Parent/Caregiver signature
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SHORT TERM AARA APPLICATION DETAILS (e.g. Missed Exam/s and/or one-off Extension to Final Due Date)
Only fill in this page where you are applying for a Short Term AARA

AARA request for assessment in the following subjects:

Subject	Assessment Task	Original Due Date	Teacher	No. of lessons missed (in Assessment Period)

OFFICE USE ONLY - AARA OFFICER SIGNATURE

HOD SENIOR SCHOOL SIGNATURE AND DATE RECEIVED	GUIDANCE OFFICER SIGNATURE AND DATE RECEIVED	HOSES SIGNATURE AND DATE RECEIVED
Date: __/__/__	Date: __/__/__	Date: __/__/__

AARA Application Approval:

- | | |
|--|---|
| <input type="checkbox"/> YES
<input type="checkbox"/> Relevant documentation attached to application
<input type="checkbox"/> Separate school statement attached | <input type="checkbox"/> NO
<input type="checkbox"/> Parent/Carer and Student emailed by the Principal/Principal's Delegate to explain why the AARA application has been deemed ineligible |
|--|---|

This application will impact on assessment held in:

- Unit 1
 Unit 2
 Unit 3
 Unit 4

Approval Required By: Principal/Principal's Delegate QCAA

PRINCIPAL/PRINCIPAL'S DELEGATE DECISION (IF APPLICABLE):

NOTE: The Principal/Principal's Delegate is unable to make the final decision when the AARA impacts General Subjects in Units 3 and 4 and requires QCAA Approval

- | | |
|--|--|
| <input type="checkbox"/> APPROVED
<input type="checkbox"/> Parent/Carer, Student, HODs and Teachers notified by the Principal/Principal's Delegate of the approved AARA
<input type="checkbox"/> Approved AARA details uploaded into MacGregor official list
<input type="checkbox"/> Application submitted uploaded by AARA Officer to QCAA Portal (Y12 Unit 3 and 4) | <input type="checkbox"/> NOT APPROVED
<input type="checkbox"/> Documented as "Contact" in OneSchool
<input type="checkbox"/> Parent/Carer and Student emailed by the Principal/Principal's Delegate to explain why the AARA application was not approved
Reason: |
|--|--|

Review date (where applicable): __ / __ / __

AARA Applies: From: __/__/__ To: __/__/__

Original documentation will be stored by the Principal's Delegate