



## Unit 3 & 4

### Access Arrangements and Reasonable Adjustments (AARA):

### APPLICATION FORM

Date:	Student Name:	Grade:
SUBJECT/S	TEACHER <u>and</u> HOD	Assessment
<b>AARA CATEGORY A:</b> (Staff member to tick) →	<input type="checkbox"/> Temporary <input type="checkbox"/> Intermittent <input type="checkbox"/> Permanent	
<b>AARA CATEGORY B</b> (Staff member to tick) ↓	<b>DOCUMENTATION REQUIRED</b> (Student/family to tick what evidence provided with application) ↓	
<input type="checkbox"/> Cognitive	<input type="checkbox"/> *Medical report (see below) <i>or</i> <input type="checkbox"/> EAP verification	
<input type="checkbox"/> Physical	<input type="checkbox"/> *Medical report (see below) <i>or</i> <input type="checkbox"/> EAP verification	
<input type="checkbox"/> Sensory	<input type="checkbox"/> Medical report (see below) <i>or</i> <input type="checkbox"/> EAP verification	
<input type="checkbox"/> Social/Emotional	<input type="checkbox"/> *Medical report (see below) <i>or</i> <input type="checkbox"/> EAP verification	
<input type="checkbox"/> Illness or Misadventure ( <b>only to be used after all other AARA have been exhausted</b> )	<input type="checkbox"/> Medical report (see below), <i>and/or</i> <input type="checkbox"/> Misadventure could include police report, witness statement, agency report, official notice, etc. Please specify: _____	
MEDICAL REPORT		
(Registered GP, medical specialist or psychologist to complete medical report; practitioner must not be related to student)		
Medical report/certificate attached to application must provide the following information:		
<input checked="" type="checkbox"/> diagnosis of disability and/or medical condition <input checked="" type="checkbox"/> date of diagnosis <input checked="" type="checkbox"/> date of occurrence or onset of the disability and/or medical condition <input checked="" type="checkbox"/> symptoms, treatment or course of action related to the disability and/or medical condition <input checked="" type="checkbox"/> information about how the diagnosed disability, impairment and/or medical condition affects the student participating in assessment, particularly timed assessment when considering external assessment <input checked="" type="checkbox"/> professional recommendations regarding possible access arrangement or adjustment (see over page for examples)		
STUDENT SIGNATURE AND DATE	PARENT/GUARDIAN SIGNATURE AND DATE	
Date:	Date:	
AARA OFFICERS SIGNATURES		
GO/HOD SS SIGNATURE AND DATE	Date:	
OFFICE USE ONLY		
AARA approved: <input type="checkbox"/> Yes <i>or</i> <input type="checkbox"/> No (see over page for details)		<input type="checkbox"/> Separate school statement attached
<input type="checkbox"/> Relevant documentation attached to application		<input type="checkbox"/> Parent, student, teacher & HOD emailed decision outcome
Documents uploaded to: <input type="checkbox"/> G:Drive <input type="checkbox"/> QCAA Portal		

## Selected Access Arrangements and Reasonable Adjustments (AARA):

QCAA Inclusive strategy	Possible Adjustment	Tick the adjustment for this assessment				
<b>Timing (rest breaks and extra time)</b>	Extension <b>Principal Reported</b> Additional time (exam) <b>QCAA Approved</b>	Extension Assignment <1week	Extension Assignment- >1 week	Extra time (imputed 5min per half hour of exam time)	Comparable Assessment	
	Rest breaks <b>QCAA Approved</b>	Rest breaks (Five minutes per half hour of assessment time, taken at any time during the assessment.)				
<b>Scheduling (order and number of sessions)</b>	Number of sessions	Breaking assessment into sections same day		Increasing pre-exam preparation		
	Order of sessions <b>Principal Reported</b>	Establishing assessment from C level to A+ level through the Exam/Assignment		Extra sessions for reading and text processing		
<b>Setting (noise wheelchair access, anxiety)</b>	Location: Room, Furniture, resources, supervision	Supervision that students require during the implementation of units, including assessment		Identifying room, furniture, resources and equipment		
	Seating: Placement <b>Principal Reported</b>	Planning the placement of seating to maximise visibility, audibility and physical access to resources, learning opportunities and support (adults or peers), as required.				
<b>Presentation</b>	Cues and prompts	Highlighting key words or phrases in directions		Using symbols such as arrows or stop signs to remind the student to do something		
	Directions <b>Principal Reported</b>	Read aloud	Read more than once	Presented as pictures/symbols	Highlighted key words	Text to Speech
<b>Principal Reported</b>	Format of the text	Braille Large print	Less text on the page	Digitised text	Audio text	
	Specialised equipment	Laptop		IPAD	Graphic organisers	
<b>Response</b>	Verbal	Scribe (adult)		Recording device	Interpreter /translator	
	Written <b>Principal Reported</b>	Adaptive tools – Pencil grip	Specialised writing tools	Keyboards	Scribe and speech to text	
<b>Principal Reported</b>	Non-verbal	Assistant technology Symbol and word bank		Finger/eye pointing		
	Specialised equipment & resources	computer or word processor	communicati on devices	speech-to-text or text-	Braille machine	talking calculator
<b>Medical Principal Reported</b>	Medical considerations	Bite Sized Food	Diabetes management	Drink	Medication	

### STUDENT CHECKLIST:

- AARA application completed
- Medical report attached
- Parent/Guardian signature
- Student signature
- ↓
- Submit completed AARA application and supporting documents to Guidance Officer/HOD Senior School

### AARA Notes

<b>DATES AARA APPLY:</b>	<b>FROM:</b>	<b>TO:</b>	

