

**Application for Assessment Extension, Exemption**

**or Special Provisions**

**This form must be completed and signed PRIOR TO THE DUE DATE of assessment**

[ ]  **Extension** [ ]  **Exemption** [ ]  **Special Provisions** [ ]  **AARA (11&12)**

Date: Click or tap to enter a date. Name: Click or tap here to enter text. Year Choose an item.

Teacher: Subject: Click or tap here to enter text. Due Date: Click or tap to enter a date.

Assignment Title: Click or tap here to enter text. Extension Date Requested: Click or tap to enter a date.

Reason for Application: Click or tap here to enter text.

Student Name: Click or tap here to enter text. Parent Signature: Click or tap here to enter text.

Student Email: Click or tap here to enter text. Parent Email: Click or tap here to enter text.

The name and email address provided above represents the same acknowledgment as a signature.

**Documentary evidence must include medical certificate for extension and exemption. Attach letters or other supporting documents to this application. In year 11/12 AARA applications require QCAA Confidential Student Statement and/or QCAA Confidential Medical Report. See flowchart on reverse side of this sheet for further details.**

Teacher Comments/Description: Click or tap here to enter text.

Teacher Code: Click or tap here to enter text.

Teacher Email: Click or tap here to enter text.

Office use only

*Application Approved:* [ ] **Yes** [ ]  **No**

*New Extension Date:* Click or tap here to enter text.

*Administration Signature:* *Date:* Click or tap here to enter text.

Both the school, and the QCAA are responsible for approving Access Arrangements & Reasonable Adjustments (AARA). Students whose ability to attend or participate in an assessment is adversely affected by **illness or an unexpected event** may be eligible for illness and misadventure AARA. If applying for an illness and/or misadventure AARA, the following processes must be adhered to (please note that illness or misadventure AARA’s will NOT be granted for the Senior External Examinations):

**Student Responsibilities**

**Inform** school of illness / unexpected event

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Year level HOD to provide student with relevant reports (*QCAA Confidential Student Statement and/or QCAA Confidential Medical Report*) to be completed by parent/caregiver/ medical practitioner to **gather** all information required

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Return all reports to HOD in a timely manner

**School Responsibilities**

**Review** upcoming formative/summative assessment

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**Identify** AARA required based on medical advice and subject requirements

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**Report** or **apply** to Principal and/or QCAA

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**Confirm** arrangements with students, parent/caregiver and staff

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**Administer** assessments and **enact** AARA