



Keebra Park SHS Academic Arrangements and Reasonable Adjustments (AARA) Application Form

This form must be completed by Year 11/12 students and parents wishing to apply for AARA

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	is early as possible so that eligible students are supported appropri , a course of study and assessment.	ately to participate in,	
Name:	Class:		
Date of Birth:	Year Level:	Year Level:	
Application Date:			
Period Applied for Start Date:	End Date:		
	Which AARA category do you wish to apply for?		
AARA Category	Documentation Required ***Please see over page for documentation requirements***	Documentation Provided	
Cognitive (e.g. Intellectual disability; verified learning disorder)	Medical reportSchool statement	YES / NO	
Physical (e.g. Physical injury or disability)	 Medical report <u>or</u> EAP verification covering Unit 3 and 4 assessments School Statement 	YES / NO	
Sensory (e.g. Autistic Spectrum Disorders)	 Medical report <u>or</u> EAP verification covering Unit 3 and 4 assessments School statement 	YES / NO	
Social/Emotional (e.g. Anxiety, depression)	 Medical report <u>or</u> EAP verification covering Unit 3 and 4 assessments School statement 	YES / NO	
Illness and/or Misadventure (e.g. Sickness; accident; unexpected event)	 Medical report <u>and/or</u> Supporting Documentation (other) 	YES / NO	
Parent Signature: Office Use Only	n that is impacting your child's learning. Student Signature:		
Application complete YES / NO	Principal Approved/ QC	Principal Approved/ QCAA Approved	







Parent, Student, HOD informed of decision YES / NO	AARA recorded YES / NO		
Supporting Documentation			
Please note : Supporting documentation must be included with your AARA application for consideration of submission as per QCAA guidelines			
Medical Report:			
To make an informed decision about an AARA application, the Q following details:	CAA requires a medical report that includes the		
 the illness, condition or event (including details of a diagno date of onset or occurrence of the disability; illness and/or symptoms, treatment or course of action related to the me explanation of the probable effect of the illness, condition particularly timed assessment when considering timed asses professional recommendations regarding AARA 	medical condition (must cover date of assessment) edical condition or event or event on the student's participation in the assessment,		
A medical report template can be provided by the school or found on our website.			
The medical report must be completed by a relevant practitioner w or psychologist (registered under Queensland's <i>Medical Practitioner</i> <i>Registration Act</i> 2001), and who is not related to the student or em	rs Registration Act 2001 and/or Queensland's Psychologists		
Non-Medical Supporting Documentation:			
 Written evidence must be provided. This may be from a re party e.g police report, social work report, insurance repor 	levant independent professional or other independent third t etc.		

• Supporting documentation must cover the date of the assessment for which the application is made

By signing this form you are consenting to Keebra Park SHS sharing information with QCAA, as required in order for the AARA to be assessed. Further information regarding how this information will be used to assess an AARA can be obtained by contacting QCAA <u>https://www.qcaa.qld.edu.au/about/contact</u>

