

Higher Education Modified Assessment Application Form



INSTRUCTIONS

Modified arrangements may be provided to a student in the event that their capacity to demonstrate their true level of competence in an examination was, is or will be significantly impaired as a result of medical, compassionate and/or compelling circumstances.

Modified arrangements may take the form of an alternative venue or alternative form of assessment, instead of an exam.

Applications must be submitted to the relevant Educational Team Leader (similar) at least four (4) weeks before the commencement of the relevant examination period and must be supported by an approved request for reasonable adjustment.

- students are not entitled to sit an exam at another time (e.g. if there is planned vacation or special personal event).
- students are not entitled to any other concession.
- wherever possible, examinations will be conducted at the same time on the same day and under the same terms and conditions as the primary venue arrangements.

STUDENT AND COURSE INFORMATION

Qualification / Course Code and Name		Delivery Campus	
Surname	Given Name/s	Student Number	
Email Address		Contact Number	

UNIT INFORMATION

Unit Code		Exam Date	
Unit Code		Exam Date	
Unit Code		Exam Date	
Unit Code		Exam Date	

MODIFIED ASSESSMENT REQUIRED

Alternative Venue	<input type="checkbox"/>	
Alternative Exam	<input type="checkbox"/>	

GROUND FOR REQUEST

Your application must also include appropriate documentation to support the grounds on which you are requesting an alternate sitting. Grounds could include the following:

<input type="checkbox"/>	Medical or compassionate grounds – medical certificate, reasonable adjustment approved, Student Support Services letter/referral
<input type="checkbox"/>	Work commitments beyond student's control – letter from employer on a company letterhead
<input type="checkbox"/>	Religious and cultural obligations – letter from religious or community leader
<input type="checkbox"/>	Sporting or cultural commitment at state or national level – letter from sporting body or cultural group
<input type="checkbox"/>	residing in a different time zone and your exam is scheduled at an unreasonable hour of the day i.e. 1.00 am – no documentation
<input type="checkbox"/>	Other.... (please state)

QUESTIONS?

Please contact the Faculty Administration Officer at the campus where your course of study is delivered or email Highered@tafeqld.edu.au

HOW TO APPLY

Submit the **completed** application with supporting documents to the Higher Education Administration Staff in the faculty or email to Highered@tafeqld.edu.au

NOTIFICATION OF OUTCOME

You will be sent an email advising you of the outcome of your application and you can normally expect a decision within 10 working days.

PRIVACY NOTICE

TAFE Queensland is collecting your personal information on this form for the purpose of managing your modified assessment application in your course. In accordance with the *Information Privacy Act 2009* (Qld), your personal information will only be accessed by staff employed by or on behalf of TAFE Queensland for this purpose. TAFE Queensland handles your personal information in accordance with our Privacy Policy (which you can view here: <https://tafeqld.edu.au/privacy>).

Your information will not be provided to any other person or agency unless you have provided TAFE Queensland with permission or as otherwise outlined in the TAFE Queensland Privacy Policy or where disclosure is permitted or required by law. Your information will be stored securely. If you wish to access or correct any of your information, discuss how it has been managed or have a concern or complaint about the way the information has been collected, used, stored, or disclosed, please contact the TAFE Queensland Privacy Officer at privacy@tafeqld.edu.au.

APPLICANT DECLARATION (Please read carefully)

If under the age of 18 years, this application must be signed by a parent/guardian. This includes consent for the applicant to have access to the Internet through TAFE Queensland.

I agree to abide by TAFE Queensland rules, regulations and policies and acknowledge that facilities made available for my use will be used only in accordance with the principles of proper use and relevant rules.

1. I declare that to the best of my knowledge, the information supplied by me is true, correct and complete in every respect.
2. I acknowledge that the submission of false, fraudulent, incorrect, incomplete or misleading information may result in student misconduct.
3. I acknowledge that if in the circumstance I supply inaccurate, incomplete or misleading information, my enrolment may be suspended.
4. I declare that I have read the instructions and that all information submitted is correct and complete.

Applicant's Signature		Date	
Parent/Guardian's Name (If student is under 18 yrs.)		Date	
Parent/Guardian's Signature (If student is under 18 yrs.)			

OFFICE USE ONLY (Student to be notified within 10 working days of the decision)	
Date application received:	/ /
Processed by:	Date: / /
Student Number:	
Student Name:	
Supporting information:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Course Coordinator Name:	Date Notified: / /
Student notified in writing:	/ /
Administrator's Name:	
Signature:	
Date:	/ /

EDUCATIONAL TEAM LEADER DECISION	
Alternative Venue	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alternative Exam	<input type="checkbox"/> Yes <input type="checkbox"/> No
Prescribed Fee Payable	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Comments/Recommendations for either the student and/ or the Unit Convenor</i>	
Signature:	Date: / /
Name:	Email: