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AARA

Access Arrangements & Reasonable Adjustments Application Pack

Inside this pack:

- Letter
- Parent Fact sheet
- Application form (incl. details about medical information requirements)
- Medical Template (provided as guide for medical practitioner if required)

**Please return completed application with supporting documents to
HOD Senior School QCAA**

21 January 2026



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Dear Parent/Guardian

QCAA – ACCESS ARRANGEMENTS AND REASONABLE ADJUSTMENTS (AARA)

In order to support your child, the Queensland Curriculum and Assessment Authority (QCAA) has developed a statewide process called Access Arrangements and Reasonable Adjustments (AARA).

Should your child wish to have an AARA put in place to support them with their senior assessment items and external exams, we ask that you have the attached medical report completed by a medical practitioner and returned to the Head of Department Senior Schooling QCAA. This will enable the College to submit these requirements to the QCAA on time. If you have concerns around highly sensitive / confidential information, we can arrange for you to meet directly with our Guidance Officers or Principal to maximise confidentiality.

Some common reasons to require an AARA could include, but are not limited to:

- Cognitive (Dyslexia, ASD, ADHD, Dysgraphia or Auditory Processing Disorder);
- Physical (Diabetes, Epilepsy, Chronic Fatigue Syndrome, MS, broken bones or misadventure);
- Sensory (Hearing, speech or vision impairments); and
- Social/emotional (Anxiety, PTSD or depression).

Some common adjustments that can be made include, but are not limited to:

- Extra time (five minutes per half hour) for exams;
- Varied seating arrangements;
- Rest breaks (five minutes per half hour) for exams;
- The ability to bring food or additional assistive equipment into an exam; and
- Extensions on assessment items.

Additional information outlining the AARA process can be found on the next page of this letter.

Yours sincerely,

Gené Riley
Head of Department
Senior Schooling – QCAA

Philippa Walker
Deputy Principal
QCAA

Greg Prestwidge
Principal
Secondary Campus

Access Arrangements and Reasonable Adjustments (AARA)

The QCAA recognises that some students may have disability impairment and/or medical conditions, or experience other circumstances that may be a barrier to their performance in assessment. Access arrangements and reasonable adjustments (AARA) are designed to assist these students.

Eligibility for AARA

AARA are provided to minimise, as much as possible, barriers for a student whose disability, impairment, medical condition or other circumstances may affect their ability to read, respond to or participate in assessment.

These barriers fall into three broad categories:

- Permanent;
- Temporary; and
- Intermittent.

The QCAA uses broad application categories for AARA eligibility:

- Cognitive;
- Physical;
- Sensory; and
- Social/emotional.

The application of AARA to student assessment is based on the functional impact of the condition for which AARA are sought. Students with the same condition may experience highly varied impacts on their education, and their ability to demonstrate their learning, knowledge and skill in assessments.

Applying for AARA

- Step 1: Read Section 6 of the QCE and QCIA policy and procedures handbook to determine whether or not your child is eligible for an AARA.
- Step 2: Discuss with the relevant stakeholders (Curriculum HOD/Guidance Officer/Senior Schooling HOD and Deputy Principal) what access and adjustments may be required.
- Step 3: Complete all of the necessary documentation.
- Step 4: Return the completed documentation to the HOD Senior Schooling – QCAA as soon as possible.

Early AARA applications are recommended to ensure timely decisions and confidence for students.

The following documentation is required when submitting an AARA application:

- School statement;
- Medical report (document attached);
- Evidence of verified disability;
- Other relevant evidence such as teacher observations, results from standardised academic testing and, where the condition is not medical, other relevant official documentation, e.g. police reports, official notices.

Ineligibility for AARA

Students are **not** eligible for AARA on the following grounds:

- Unfamiliarity with the English language;
- Teacher absence or other teacher-related difficulties;
- Matters that the student could have avoided (e.g. misreading an examination timetable, misreading instructions in examinations);
- Matters of the student's or parent's/guardian's own choosing (e.g. family holidays); and
- Matters that the school could have avoided (e.g. incorrect enrolment in a subject).

Access arrangements and reasonable adjustments (AARA) Year 11 and 12

This fact sheet provides information about the AARA process. The Queensland Curriculum and Assessment Authority (QCAA) recognises that some students have disability, impairment and/or medical conditions, or experience other circumstances that may be a barrier to their performance in assessment. Access arrangements and reasonable adjustments (AARA) are designed to assist these students through minimising barriers for eligible students to demonstrate their learning, knowledge and skill in assessment.

QCAA stipulate:

- Year 11 AARA are **school based decisions** made in line with QCAA guidelines
- Year 12 AARA applications are submitted to QCAA for **approval**

Guidelines stipulate that schools make decisions about AARA for **Units 1 and 2 (Year 11)**. They ensure that for Applied, Applied (Essential) and General subjects, the AARA implemented for an eligible student for assessment in Units 1 and 2 are aligned to those that are available for summative assessment in **Units 3 and 4 (Year 12)**.

The provision of AARA for assessment in Units 1 and 2 by a school is not a guarantee that students will be provided the same access or the same adjustments for assessment in Units 3 and 4.

Steps for Access

1. Student and/or parent enquiries to HOD SS QCAA to collect AARA application. AARA information posted on website, social media and through student assemblies.
2. HOD Senior School QCAA receives AARA application and supporting documents to establish eligibility and meet QCAA submission dates. School contacts parent if further evidence required.
3. HOD Senior School QCAA relays confirmation of eligibility for AARA to HOD and teachers using AARA template ready for implementation.
4. HOD Senior School notifies student/parent of AARA outcome. School retains supporting documentation.

Eligibility for AARA

AARA are provided to minimise, as much as possible, barriers for a student whose disability, impairment, medical condition or other circumstances may affect their ability to read, respond to or participate in assessment.

These barriers fall into three broad categories:

- permanent
- temporary
- Intermittent.

Ineligibility

Students are **not** eligible for AARA on the following grounds:

- unfamiliarity with the English language
- teacher absence or other teacher-related difficulties
- matters that the student could have avoided (e.g. misreading an examination timetable, misreading instructions in examinations)
- matters of the student's or parent's/carer's own choosing (e.g. family holidays)
- matters that the school could have avoided (e.g. incorrect enrolment in a subject).

IMPORTANT

Early applications for all AARA are recommended to ensure timely decisions and confidence for students.

- Applications submitted close to the due date for assessment should not be for known long term conditions.
- Applications for AARA for long term conditions should be submitted at earliest possible time upon diagnosis.

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 QCAA requires a medical report that includes the following details:

- the illness, condition or event (including details of a diagnosis, where applicable)
- date of onset or occurrence of the disability; illness and/or medical condition (must cover date of assessment)
- symptoms, treatment or course of action related to the medical condition or event
- explanation of the probable effect of the illness, condition or event on the student's participation in the assessment, particularly timed assessment when considering timed assessment
- professional recommendations regarding AARA

The medical report must be completed by a relevant practitioner who is a general practitioner (GP), medical specialist, or psychologist (registered under Queensland's *Medical Practitioners Registration Act 2001* and/or Queensland's *Psychologists Registration Act 2001*), and who is not related to the student or employed by the school.

Non-Medical Supporting Documentation:

- for non-medical claims, must be written evidence from a relevant independent professional or other independent third party, such as a witness or police report
- Supporting documentation must cover the date of the assessment for which the application is made

Chancellor State College AARA Application Form



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**This form must be completed by all students and parents wishing to apply for AARA.
Completed application must include required documentation.**

| <p>AARA are planned and negotiated as early as possible so that eligible students are supported appropriately to participate in, and complete the requirements for, a course of study and assessment.</p> | | | | | | | | | | | | | | | | | | | | |
|--|---|------------------------------------|---------------|---|------------------------|--|--|----------|--|---|----------|---|---|----------|--|---|----------|--|---|----------|
| Name: | | Year Level: | | | | | | | | | | | | | | | | | | |
| Date of Birth: | | | | | | | | | | | | | | | | | | | | |
| Application Date: | | | | | | | | | | | | | | | | | | | | |
| Period Applied for | | Start Date: _____ End Date: _____ | | | | | | | | | | | | | | | | | | |
| Subject(s): | | All Subjects: | | | | | | | | | | | | | | | | | | |
| <p>Which AARA category do you wish to apply for?</p> <table border="1"> <thead> <tr> <th>AARA Category</th> <th>Documentation Required ***Please see over page for documentation requirements***</th> <th>Documentation Provided</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Cognitive (e.g. Intellectual disability; learning disorder)</td> <td> <ul style="list-style-type: none"> Medical report EAP verification covering Unit 3 and 4 assessments School statement </td> <td>YES / NO</td> </tr> <tr> <td><input type="checkbox"/> Physical (e.g. Physical injury or disability)</td> <td> <ul style="list-style-type: none"> Medical report or EAP verification covering Unit 3 and 4 assessments School Statement </td> <td>YES / NO</td> </tr> <tr> <td><input type="checkbox"/> Sensory (e.g. Autistic Spectrum Disorders)</td> <td> <ul style="list-style-type: none"> Medical report or EAP verification covering Unit 3 and 4 assessments School statement </td> <td>YES / NO</td> </tr> <tr> <td><input type="checkbox"/> Social/Emotional (e.g. Anxiety, depression)</td> <td> <ul style="list-style-type: none"> Medical report or EAP verification covering Unit 3 and 4 assessments School statement </td> <td>YES / NO</td> </tr> <tr> <td><input type="checkbox"/> Illness and/or Misadventure (e.g. Sickness; accident; unexpected event)</td> <td> <ul style="list-style-type: none"> Medical report or Supporting Documentation (other) </td> <td>YES / NO</td> </tr> </tbody> </table> | | | AARA Category | Documentation Required ***Please see over page for documentation requirements*** | Documentation Provided | <input type="checkbox"/> Cognitive (e.g. Intellectual disability; learning disorder) | <ul style="list-style-type: none"> Medical report EAP verification covering Unit 3 and 4 assessments School statement | YES / NO | <input type="checkbox"/> Physical (e.g. Physical injury or disability) | <ul style="list-style-type: none"> Medical report or EAP verification covering Unit 3 and 4 assessments School Statement | YES / NO | <input type="checkbox"/> Sensory (e.g. Autistic Spectrum Disorders) | <ul style="list-style-type: none"> Medical report or EAP verification covering Unit 3 and 4 assessments School statement | YES / NO | <input type="checkbox"/> Social/Emotional (e.g. Anxiety, depression) | <ul style="list-style-type: none"> Medical report or EAP verification covering Unit 3 and 4 assessments School statement | YES / NO | <input type="checkbox"/> Illness and/or Misadventure (e.g. Sickness; accident; unexpected event) | <ul style="list-style-type: none"> Medical report or Supporting Documentation (other) | YES / NO |
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| <input type="checkbox"/> Illness and/or Misadventure (e.g. Sickness; accident; unexpected event) | <ul style="list-style-type: none"> Medical report or Supporting Documentation (other) | YES / NO | | | | | | | | | | | | | | | | | | |
| <p>Please briefly describe the situation that is impacting your child's learning.</p> | | | | | | | | | | | | | | | | | | | | |
| Parent Signature | | Student Signature | | | | | | | | | | | | | | | | | | |
| Office Use Only | | | | | | | | | | | | | | | | | | | | |
| Application complete YES / NO | | Principal Approved / QCAA Approved | | | | | | | | | | | | | | | | | | |
| Parent, student, HOD informed of decision YES / NO | | AARA recorded YES / NO | | | | | | | | | | | | | | | | | | |

Confidential medical report

Access arrangements and reasonable adjustments (AARA)

The QCAA requires a medical report for medical claims for AARA or illness and misadventure. Medical reports may be completed by the student's general practitioner (GP), medical specialist, or psychologist (registered under Queensland's *Health Practitioner Regulation National Law Act 2009*). The health professional providing a report must not be related to the student or employed by the school. The information provided needs to be current and relate to the relevant assessment period.

Information provided in this report is treated in strictest confidence and is used only for the purpose of determining the AARA application.

Use of this template is *not* required. If the health professional does not use this template, they must supply a current medical report containing all of the following information.

This page is to be completed by the student and their parent/carer

| Student details | | | |
|--|---|-----------|--|
| Student name | | | |
| LUI | | | |
| School | | | |
| FOR If you are unsure, see About this report , on the last page. | <input type="checkbox"/> AARA application (for existing and chronic conditions) Health professionals complete: <ul style="list-style-type: none">• Part A — AARA• Health professional details. | OR | <input type="checkbox"/> Illness and misadventure application (for an unexpected illness or event) Health professionals complete: <ul style="list-style-type: none">• Part B — Illness and misadventure• Health professional details. |
| I give permission for my health professional to provide information concerning this application to the QCAA, if required. | | | |
| Student signature: | Date: / / | | |
| Parent/carer signature: (if student is under 18) | Date: / / | | |

Electronic signature: If this document is completed electronically, by completing the fields above and inserting the signatory's name, the signatory agrees that this becomes a signed document pursuant to section 14 of the *Electronic Transactions (Queensland) Act 2001*.

The school will submit this completed report as part of an AARA or illness and misadventure application via the QCAA Portal.

When completed, QCAA classification = SENSITIVE (PERSONAL INFORMATION)

The information you provide on this form is being collected and used in relation to the functions and powers prescribed under Part 2 of the *Education (Queensland Curriculum and Assessment Authority) Act 2014*. The information will be accessed by QCAA staff and handled in accordance with the *Information Privacy Act 2009*. Information held by the QCAA is subject to the *Right to Information Act 2009*.

Part A — AARA application

This section is to be completed *only* by the health professional for AARA applications (for existing and chronic conditions)

| | | |
|---|---|---|
| Student name | | |
| Diagnosis | | |
| Date of diagnosis | / | / |
| Date of occurrence/onset | / | / |
| <p>Provide a brief history of the student's disability, impairment and/or medical condition, including relevant functional impact/s.</p> | | |
| <p>Is the student currently receiving treatment? Please indicate.</p> | | |

Comment on how the disability, impairment and/or medical condition is likely to affect this student's daily functioning in the classroom.

Comment on the probable effect of the disability, impairment and/or medical condition on this student's capacity to complete timed assessment (examinations). Include professional recommendations for assessment adjustments.

Part B — Illness and misadventure application

This section is to be completed *only* by the health professional (in the case of an unexpected illness or event).

Information for the health professional

- Students who are sick at the time of **external assessment** may request the submission of an illness and misadventure application if they are unable to attend assessment, or if they attend and feel that their performance was adversely affected by illness or misadventure.
- Approval of illness and misadventure requires strong supporting evidence. Medical information provided must be more detailed than a certificate stating that a student has a medical condition and is unfit for duty.
- Note:** External assessment cannot be rescheduled. Students should attend if they are well enough to do so and there is no risk to others. A late application for AARA can be considered — if AARA can address the functional impacts of the condition to enable the student to participate on the same basis as other students (e.g. use of a computer for a student with an injury affecting handwriting; rest breaks for a student who is unable to sit for extended periods of time).

| | | | | | | |
|---|--|--|--|--|--|--|
| Student name | | | | | | |
| Diagnosis | | | | | | |
| Nature of condition | <input type="checkbox"/> temporary medical condition OR <input type="checkbox"/> deterioration in a chronic condition | | | | | |
| Date of diagnosis | / / | | | | | |
| Duration of effect | / / to / / | | | | | |
| Comment on the likely impact/s on the student's ability to undertake or complete timed assessment (examinations) | | | | | | |
| | | | | | | |

| | | |
|---|-----------------------------------|--|
| I consider that the effect of the impairment arising from the medical condition is/was: | | |
| <input type="checkbox"/> mild | <input type="checkbox"/> moderate | <input type="checkbox"/> severe |
| I consider that the student is/was: | | |
| <input type="checkbox"/> disadvantaged in assessment performance | | <input type="checkbox"/> unable to participate in assessment |
| If the student was affected for less than a full day, comment on the amount of time the student was affected during a timed assessment, e.g. second half of the examination session. | | |
| | | |

Health professional details

| | |
|---|------------------|
| Name | |
| Profession | |
| Phone | |
| Specialty/qualifications (if applicable) | |
| Place of work | |
| Registration number | |
| Practice stamp (if applicable) | |
| Signature: | Date: / / |

Electronic signature: If this document is completed electronically, by completing the fields above and inserting the signatory's name, the signatory agrees that this becomes a signed document pursuant to section 14 of the *Electronic Transactions (Queensland) Act 2001*.