

STUDENT ACCESS FORM

If you have a disability or medical condition complete this form and the Student Centre will contact you regarding your needs. It is essential that you register with us as soon as possible in order to receive additional help and support. Our aim is to ensure students requiring support realise their full potential.

We are committed to the provision of reasonable adjustments, in consultation with you, within a reasonable time after notification of the need for adjustments.

A Student Engagement Manager will arrange a meeting with you and devise a Learning Access Plan if required which may include adjustments that support you in your course.

1. STUDENT DETAILS

Name:		Student No:	
Course:			

2. STUDENT ACCESS INFORMATION

Provide details of your access needs, health or mental health condition and the impact it has on your study:

What support / adjustments are you requesting or have been recommended by your medical practitioner?

Please outline the support/ reasonable adjustment that will meet your requirements e.g. extended time to complete an assessment task because of a physical injury or condition.

Please attach a medical certificate or other documentary evidence to support your application. Refer to the [Student Handbook](#) for guidelines regarding medical certification.

Do you give permission for teaching staff or other relevant staff to be notified of Learning Access Plan?

YES

NO

4. STUDENT DECLARATION

I declare that the information I have submitted in this application is true, correct and not misleading. I understand that AFTRS may vary or reverse any decision concerning my application or not process my application if this is not the case, and that giving false or misleading information may also be an offence under the *Criminal Code*. [I authorise AFTRS to contact any person or organisation giving supporting documents for the purpose of verifying the information they contain.]

SIGNED:

DATE:

5. PRIVACY INFORMATION

AFTRS requires the information you give in this application and in supporting documents, to process the application. Where required to meet AFTRS' legal or administrative obligations, AFTRS may disclose information in it to other Australian government entities. AFTRS collects and deals with your personal information according to Australian privacy law and AFTRS' [Privacy Policy](#), which sets out how you may access and correct the personal information AFTRS holds about you, and how you may complain about any privacy breaches.

OFFICE USE ONLY

6. RECOMMENDATION AND APPROVAL

Application received in the Student Centre:

Date:

Application complete with all required documents:

Date:

Meeting with Student Engagement Manager:

Date:

Does the student require support services or reasonable adjustments to be made to their learning environment?

YES

NO

If yes, provide details or develop a Learning Access Plan.

Has the student given permission for teaching staff or other relevant staff to be notified of any adjustments that are required?

YES

NO

If yes, please specify.

Student Engagement Manager:

Recommended

Not Recommended

Signature:

Date:

Registrar & Director People and Culture or delegate:

Approved

Not Approved

Signature:

Date:

7. STUDENT CENTRE ACTION

Applicant advised of decision

Date:

Learning Access Plan developed and uploaded to Paradigm

Date:

Any action required under reasonable adjustment completed

Date:

Adjustments discussed and given to relevant staff

Date:

