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|  | Application for district adviserQueensland Certificate of Individual Achievement (QCIA) |

## Section 1: Applicant details

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| Position details |
| QCIA district adviser  | [ ]  QCAA district (write district name):       |

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| Contact details |
| Title: |     | Family name: |       | Former name (if applicable):  |  |
| Given name/s: |       | Preferred name: |       |
| Your Brief Identification Code (BIC):

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|   |   |   |   |   |   |   |   |

*Your BIC* commences with 4 numerals followed *by 4 letters.* | No BIC? We recommend you use the day and month of your birthday then your mother’s first initial and the first three letters of her surname at birth — e.g. if you were born on 12 January and your mother was Pat Walker, then your BIC would be 1201PWAL. |
| Residential address: |       | Postcode: |       |
| Postal address: (if different) |       | Postcode: |       |
| Work phone: |       | Mobile: |       |
| Work email: (It is essential for district advisers to have an email address) |       |

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| Relevant experience |
| Academic qualifications: (Pertinent to this application) |       |
| Current school or educational institution: |       |
| Current position: |       |
| Previous school or educational institution: |        | Year left:        |
| Do you have experience with the QCIA, or Certificate of Post-Compulsory School Education (CPCSE)?[ ]  Yes [ ]  No | If YES, briefly state the involvement:  |       | Years:        |
| Comment:       |
| Total teaching experience in Qld schools: | Years:       | Experience relevant to this application(minimum two years required): | Years:       |
| QCIA district adviser appointments are for a maximum of two terms (six years each term). District advisers can reapply for the position after 12 years. For further details and information to assist you to complete the form, please access the QCIA information page on the Queensland Curriculum and Assessment Authority (QCAA) website: [www.qcaa.qld.edu.au](http://www.qcaa.qld.edu.au). |

## Section 2: Key attributes

QCAA QCIA district advisers:

* work within the scope of the role and responsibilities of a district adviser and the system of externally moderated, school-based assessment to quality assure QCIA processes and procedures
* provide advice and recommendations to schools about the eligibility to receive a QCIA, the certificate processes and procedures, and student’s individual achievement
* use QCAA-related documentation to communicate justified, evidence-based advice and recommendations to schools
* use high-quality written and verbal skills to communicate with schools, and provide leadership to the peer-review process
* manage quality-assurance processes, which include:
* providing quality comments on QCIA verification and review forms
* providing timely and appropriate advice and recommendations
* committing to the leadership of QCAA-documented, systemic approaches to peer reviewing
* organising administrative processes to ensure efficient quality-assurance meetings.

### Responding to the key attributes

Please write brief statements to support your application.

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| Within the context of their school or support responsibilities, the ideal candidate for the role of QCIA district adviser will demonstrate the appropriate knowledge and skills to manage QCIA processes and procedures through: |
| * effectively using QCIA-related documentation to inform reviewing

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| * effectively completing verification and review forms

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| * demonstrating a collegial and professional approach to externally moderated school-based assessment to quality assure school assessment decisions

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| * showing capacity to demonstrate leadership of QCIA quality-assurance processes and procedures

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## Section 3: Principal’s/Manager’s approval

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| **Applicant’s name:** |       |
| I agree that as a QCIA district adviser, ………………………………………… will be released for quality-assurance meetings relevant to their role (e.g. district verification, state review, district adviser training, and moderation conference).

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| **Principal’s/Manager’s name:**       |
| **Principal’s/ Manager’s signature:** | …………………………………………… | **Date:** | ………………… |

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| **Supporting comments:**       |

## Section 4: Applicant agreement

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| If this application is successful, I undertake to:* work within the scope of my role and responsibilities and the system of externally moderated school-based assessment to quality assure QCIA processes and procedures
* accept, support and implement quality assurance processes and procedures
* meet the timelines for quality assurance processes
* commit to punctual attendance at **all** meetings and training for district advisers
* observe Queensland Government privacy policies, the principles of confidentiality, and respect the rights of others
* act ethically, legally and with integrity consistent with the Code of Conduct for the Queensland Public Service, January 2011, (available on the QCAA’s website, [www.qcaa.qld.edu.au](http://www.qcaa.qld.edu.au)).

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| **Applicant’s name:**       |
| **Applicant’s signature:** | …………………………………………… | **Date:** | ………………… |

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### Submitting the application

**The completed application form should be emailed, faxed or posted to the Coordinator (State Panels Operations), Services Coordination Unit**

Email: scu@qcaa.qld.edu.au

Fax: (07) 3221 2553

PO Box 307

SPRING HILL QLD 4004

Ph.: (07) 3864 0282