

<input type="checkbox"/> Small group supervision	The candidate will be supervised in a room with a small group.
<input type="checkbox"/> Special equipment	Includes special desk, special chair, cushion, heat pack, ice pack or other physical aid. (Please specify equipment in the Additional information section.)
<input type="checkbox"/> Use of a computer	This allows the candidate to type responses. See Table 2 in Appendix B of the 2019 <i>Examination handbook: Senior External Examination</i> for more information about use of a computer.
<input type="checkbox"/> Use of a dictionary	For candidates for whom English is an additional language or dialect, QCAA may approve the use of a bilingual dictionary for Accounting, Biology, Chemistry, Physics and Visual Art. Dictionaries are allowed in all language subjects except Chinese.
Additional information:	

Which examination/s are you applying for?

Subject	Date

If we need additional information

I give permission for QCAA staff to contact the school or the applicant to obtain further information about my application, if required.

If a candidate is under 18, a parent/carer must explain this form to them. Please sign and date the relevant line below.

Signature of the individual: **Date:** / /

(if over 18 years of age)

Signature of the parent/carer: **Date:** / /

(if under 18 years of age)

The information provided on this form will be used for special provision for the Senior External Examination as part of legislative functions described in Education (Queensland Curriculum and Assessment Authority) Regulation 2014 (s 76). Personal information will be accessed by authorised 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*.

Medical certificate

2019 Senior External Examination

Medical reports may only be completed by the student's general practitioner (GP), medical specialist, or psychologist registered under the *Health Practitioner Regulation National Law Act 2009* (Qld). 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 examination period.

I, _____, registered medical practitioner,
(name, professional qualification)

of _____, provider no. _____,
(address of practice)

examined _____
(patient's name)

on _____. In my opinion, the person has
(date/s of consultations)

(name of medical condition)

This person's medical condition will affect them in the following ways when sitting their examination/s:

Name any prescribed medications this person is taking and list any side effects:

Signature

Date

/ /

Medical practitioner's stamp

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