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| Venue application formSenior External Examination (SEE) |

This form is to be completed by candidates who are not registered or enrolled with a Queensland main learning provider (MLP).

Submit this completed application form to aara@qcaa.qld.edu.au.

#### Student’s details

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| LUI |  |  |  |  |  |  |  |  |  |  |
| Given name/s |  |
| Family name |  |
| Is the venue required for all Senior External Examinations? | [ ]  Yes[ ]  NoIf no, specify subject/s below. |
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

#### Proposed venue details

|  |  |
| --- | --- |
| Venue name |  |
| Main business of the venue |  |
| Address line 1 |  |
| Address line 2 |  |
| Address line 3 |  |
| Suburb |  |
| State |  |
| Postcode |  |
| Country |  |
| Phone number |  |
| Email address |  |

The proposed venue (if not a Queensland school):

[ ]  has a locked room for secure storage of materials, with no external access (any external windows or doors must have security covering, e.g. metal security mesh, steel door grate)

[ ]  can be accessed prior to the assessment start times to allow sufficient time for room/material preparation

[ ]  has internet connectivity and a quiet, suitable space for assessment.

#### Proposed supervisor details

The QCAA will contact the proposed supervisor directly to confirm details.

|  |  |
| --- | --- |
| Given name/s |  |
| Family name |  |
| Current position |  |
| Meets eligibility requirements | [ ]  Yes[ ]  No |
| Phone number |  |
| Email address |  |

Supervisors must meet eligibility criteria and agree to all supervisor duties.

The proposed supervisor:

[ ]  has confirmed their ability to fulfil all required duties and completed the *Supervisor statement as to external assessment administration: External assessment — variation to venue.*

#### Costs

[ ]  I have read the information at [www.qcaa.qld.edu.au/senior/see/adult-students](https://www.qcaa.qld.edu.au/senior/see/adult-students) and understand that I am responsible for the payment of all costs associated with the conduct of assessment, which may include venue, supervision, courier and QCAA administration fees. I understand that these costs must be paid prior to the first assessment on receipt of the invoice from the QCAA.

#### Reason for application

Select the relevant reason for application:

[ ]  I am an adult/independent learner not registered or enrolled with a Queensland education provider.

[ ]  Other reason — provide detail below.

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

By submitting a completed form, you consent to your personal information being transmitted, and/or stored on IT equipment outside Australia. If you are required to sign this document and submit it electronically, you consent to the collection of your signature and agree that the document becomes a signed document pursuant to section 14 of the *Electronic Transactions Act 2001* (Qld).