



CONFIDENTIAL

Student Details

Student name	
Date of Birth	

Uni SA Student ID	
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UniSA provides services and adjustments for students with a disability and/or health condition in order to minimise the impact of disability on study. Students who need support or study adjustments are required to provide current documentation from a treating practitioner. **Note: Diagnosis of a learning disability or autism spectrum disorder** must be accompanied by a psychological educational/psychometric assessment conducted by an appropriate professional. Further information is available at <http://www.unisa.edu.au/disability/current-students/supporting-documentation/>

Personal Information

Your personal information is being collected by the Access and Inclusion Service on behalf of UniSA for the purposes of providing disability-related services and adjustments. Information provided on your TPS will only be released with your consent or if there is a legal requirement to do so.

Student Declaration

I, (Student name) give my treating practitioner authority to release information relating to my disability and/or health condition to the Access and Inclusion Service at the University of South Australia. I also authorise the Access and Inclusion Service to contact the practitioner to clarify these supports as required.

Student Signature: **Date:**/...../20.....

Phone:

This form can be brought to an on campus appointment with an Access and Inclusion Advisor, or returned by email inclusion@unisa.edu.au (Subject: Access and Inclusion Services Confidential Documentation)

TO BE COMPLETED BY HEALTH PRACTITIONER

Nature of disability, mental health or medical condition/s. Please circle all those that apply.						
Physical	Vision	Hearing	Mental health	Neurological	Brain Injury	Other
Brief description of condition:						
Mental health conditions: Is the student's condition expected to resolve/improve/be well managed within:						
6 months		12 months		Expected review date:		
Ongoing & fluctuating		Ongoing				
Does the student have a current mental health care plan? Yes / No						
Medical conditions: Is the student's condition expected to resolve/improve/be well managed within:						
6 months		12 months		Ongoing & degenerative		
Ongoing & fluctuating		Ongoing & stable		Expected review date:		



Impact on study

Reading (e.g. alternative print, speed, comprehension...)

Writing/Fine motor skills (e.g. physical ability to write, speed, legibility, handling lab equipment...)

Cognitive skills (e.g. concentration, attention, planning/organising, processing, memory...)

Physical environment (e.g. mobility, special equipment/specific software, seating, acoustics...)

Attendance/Participation. (For some courses attendance and participation is an essential assessment criteria. Students may be able to negotiate some flexibility in regards to attendance on an occasional basis, but will need to catch up on any work missed.)

Working in groups, presentations to peers, collaborating with others....If adjustments needed please explain the reason:

Ability to complete assessments within expected timeframes/due dates. (If a student does need to negotiate extensions, this needs to be done prior to the due date). If the student may need to negotiate extensions, please explain the reasons:

Alternative exam arrangements (AEA). (Extra time, medication in exams, food/drink, medical equipment, use of specialised equipment such as computers, ergonomic furniture, smaller venue)

Practitioner Details (*I declare that I am not a close relative or associate of this student.*)

Name		STAMP
Position & Provider #		
Date		