

CHOOSE THE FUTURE Educational Disruption Educational Disruption

APPLICANT DETAILS							
Name:							
QTAC Application Number:							
ELIGIBILITY TO APPLY Complete and return this form if you have experienced disrupted Senior schooling or equivalent study. This category is available to students currently completing Year 12 or equivalent.							
APPLICANT STATEMENT (please type directly onto the form or print clearly)							
During my Senior schooling I have experienced one or more of the following which was beyond my control: (Please tick the relevant box/boxes)							
Excessive change of teachers in a subject during senior years. Frequent change of school, and/or change of school system in Years 11 and 12 with adverse impact. Required to study subject/s through distance education or other. Unable to continue a subject (e.g. school discontinued subject, transferred in and school does not offer this subject). Significant peer conflict experienced in the school environment during Years 11 and/or 12. Significant disruption to your school (e.g. buildings destroyed). Regional or remote schooling in rural area classification as RA3-RA5 as per the ASGS Remoteness Areas Classification (2016). Click here to check your RA classification or visit: http://www.doctorconnect.gov.au/internet/otd/publishing.nsf/Content/locator PERSONAL STATEMENT The circumstances I have experienced were/are: This affected my study because:							
Applicant to sign: Documentation attached							

Current Year 12s, please pass this document to your school for completion. **SCHOOL STATEMENT** is on the second page of this application form.

	ANT DETAI							
Name:								
QTAC Application Number: SCHOOL STATEMENT (To be completed by a Guidance Officer or other appropriate school representative.) Please read the applicant statement and comment appropriately.								
may also	include your sta	tement as an at	tachment.					
2. Indica	djustment mad	tments have be	een made for th	nis student:				
	ional time to c	ompiete tasks sessable tasks						
	•	or/school supp						
Tutor		11						
Othe	r:		<u></u>					
academi	c performance	. Please consid		s instance is les	•	act on the stude ious than other		
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impact						Profound & C	hronic Imp	
School na	ame:							
Suburb/to	own:							
School representative:								
School re	School representative to sign:							
		o sian:		Date	e completed:			

Upload your documentation to your online application at https://applications.qtac.edu.au.

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