



REASONABLE ADJUSTMENT APPLICATION FORM

Students with a disability or a long-term medical condition, which may have an impact on their studies, can apply for reasonable adjustment by completing this form. Students must apply for reasonable adjustment in writing to Student Services at the earliest opportunity upon enrolment or as soon as the condition is diagnosed to ensure that reasonable adjustments can be made available within required time frames. For further information please refer to the Student Assessment Policy and associated Procedure available on the Australian Institute of Higher Education website: www.aih.nsw.edu.au

USE BLOCK LETTERS WHEN COMPLETING THIS FORM AND PLEASE KEEP A COPY.

PERSONAL DETAILS

Title: Mr Ms Other (please specify)	
Family name:	
First name(s):	Male Female
Date of birth (dd/mm/yy):	
Student ID:	
Phone (home/mobile):	
Email:	
Full address:	
City:	Post code:
State:	Country:
Course:	

REASONABLE ADJUSTMENT DETAILS

Grounds for Reasonable Adjustment:
Evidence Provided (a report from a medical practitioner is required):
Adjustments sought:

STUDENT DECLARATION

I declare that the information provided in this application is accurate. I have read and I understand the information about the reasonable adjustment process as outlined in the Student Assessment Policy and associated procedure.	
Signature:	Date:

OFFICE USE ONLY

Received by:	Received date:
Reviewed By:	Date:
Approved Diary Note	Declined Form uploaded in Student Management System
Comments and outcome:	

Privacy: We recommend that you read the AIH's Management of Personal Information Policy and associated Procedure published on our website [www.aih.nsw.edu.au]

Return this form to:
Australian Institute of Higher Education P/L
Level 4, 451 Pitt St, Sydney NSW 2000
Phone +(612) 9020 8050, Fax +(612) 8004 9286
Email: studentservices@aih.nsw.edu.au