

# Student Accessibility and Equity

## STUDENT REGISTRATION/TREATING HEALTH PROFESSIONAL REPORT



The CQUniversity Student Accessibility and Equity Service assists students living with disability, illness, injury, medical and/or mental health conditions and those who are the primary carer of someone with a disability. For further information please see the Disability Policy located at [www.cqu.edu.au/disability](http://www.cqu.edu.au/disability).

The Student Accessibility and Equity Service requires medical information from your treating health professional to implement reasonable educational adjustments. This information is treated with sensitivity. Information shared on this registration form and consultation with you is used exclusively to assist the Accessibility Consultant and relevant CQUniversity staff (where required) to provide the most appropriate support.

Once your completed form has been received by the Student Accessibility and Equity Service, you will be contacted to participate in an intake interview to discuss support arrangements. Confidentiality will also be discussed.

### 1. STUDENT DETAILS

Name

Student number

Do you identify as  Aboriginal  Torres Strait Islander

I give permission for this treating health professional report to be provided to the Accessibility Consultant, CQUniversity Australia

I give permission for the release of the name of my disability, illness, injury, medical or mental health condition and its impacts on my studies to relevant CQUniversity staff

I have read and understand the privacy statement on each page of this form

Signature

Date  /  /

### 2. TREATING HEALTH PROFESSIONAL REPORT

|                   |          |
|-------------------|----------|
| Practitioner name |          |
| Profession        |          |
| Address           |          |
|                   | Postcode |

|                                    |
|------------------------------------|
| Practice stamp and provider number |
|------------------------------------|

Name/s of the disability, illness, injury or mental health condition/s (attach relevant reports)

|              |
|--------------|
| <br><br><br> |
|--------------|

Indicate the category/ies of impairment (tick which apply)

Hard of Hearing/Deaf  Low Vision/Blindness  Physical Disability  Medical Condition  Mental Health Condition

Intellectual disability  Acquired Brain Injury  Specific Learning Disability  \*Neurological condition

Not specified  Other Disability

Severity of condition  Mild  Moderate  Severe  Profound

Prognosis of condition  Temporary  Permanent  Fluctuating/episodic  Degenerative

Is there a need for ongoing Health Professional input (ie. GP reviews, counselling, specialist treatment, etc.)?  Yes  No

If yes, type and frequency:

\* Neurological condition affects the usual function of the central and peripheral nervous system, including Autism Spectrum Disorder, epilepsy, Alzheimer's disease, multiple sclerosis, Parkinson's disease, brain tumours, ADHD

**IMPORTANT PRIVACY INFORMATION:** Personal information is collected, used and stored by CQUniversity to facilitate your studies and related activities. Commonwealth and state departments require certain information about student details and activities to be reported or disclosed by the University. Any other provision of your information will only be as authorised by you or required by law and in accordance with the Information Privacy Act 2009 Qld and the University's Information Privacy Policy and Procedure.

## 2. TREATING HEALTH PROFESSIONAL REPORT (CONTINUED)

Recommended Study Load  Full-time (3-4 units)  Part-time (1-2 units)

Please indicate if the student's condition will impact any of the following aspects of their studies (tick boxes, circle all relevant examples and provide further details if required):

- Cognitive skills (for example attention and concentration; planning and organisation; processing skills-auditory and visual, conceptual skills-sequencing and integration, memory, other)
- Reading (for example standard print, reading from white board/screens, speed; comprehension, other)
- Writing (for example physical ability, writing speed, spelling, punctuation, grammar, text organisation, other)
- Other associated areas (for example understanding or using spoken language, performing calculations, fine motor skills/manipulating objects, other)
- Physical environment (for example handling of heavy doors; negotiating stairs, using a standard computer or seating, standard acoustics, retrieving books from library shelves, moving easily between venues on campus, other)
- Attendance and participation in lectures, tutorial, practical and laboratory classes: on campus attendance at scheduled classes (for example at mandatory residential schools, completing work placement completing work independently, other)
- Interpersonal & communication skills (collaborating with others, participating in groups, making presentations, participating in online activities)

Any other impact on study (please provide details in textbox)

Please indicate services that would support this student and add details in text boxes below:

- Alternative exam arrangements (for example: additional working time, rest breaks, small groups)
- Alternative formatting
- Mobility access
- Specialised equipment and/or software
- Assignment extensions (please provide details in text box below)

Other (please provide details in text box below)

Treating Health

Professional's signature

Date

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| D | D | / | M | M | / | Y | Y |
|---|---|---|---|---|---|---|---|

Please return completed documentation to: CQUniversity Australia, Student Accessibility and Equity Service, Building 31, Level 1, Bruce Highway, Rockhampton Qld 4702 Email: [accessibility@cqu.edu.au](mailto:accessibility@cqu.edu.au)

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# MEDICAL DOCUMENTATION REQUIREMENTS

Students Directorate – Student Accessibility and Equity Service



To ensure that our service is able to provide you with the level of support you require, it is important that you read the following guidelines in relation to medical documentation required for your registration with the Student Accessibility and Equity Service.

All medical information supplied must

- » be completed by an appropriate treating health professional (please see below for comprehensive guidelines);
- » contain the professional's stamp or provider number;
- » be signed and dated by the professional;
- » list the effects of any required medication;
- » identify and state the impacts of the condition on the student's ability to study, sit examinations, attend residential schools and placements, and satisfy other inherent requirements of the program of study.

For all conditions (except temporary conditions)

The treating health professional's report may be used to satisfy the above requirements. However, additional specialist information will be required for the following:

- » Learning disability - documentation must provide evidence of learning disability based on the Diagnostic and Statistical Manual of Mental Disorders IV-TR or the Diagnostic and Statistical Manual of Mental Disorders V.
- » ADHD – Documentation must provide evidence of ADHD/ADD based on the Diagnostic and Statistical Manual of Mental Disorders.

For temporary conditions

A medical certificate is sufficient provided it specifies:

- » the period of time which the student will be affected by the condition;
- » the impacts/limitations on the student in relation to study during this period.

Age of documentation

- » temporary conditions – medical certificate should be current for the period of assistance required (i.e. should state specific dates that the student is unwell/unfit/ impacted by the condition). If student requires assistance outside of the timeframe specified, an updated medical certificate or letter from doctor will be required;
- » fluctuating conditions – students with fluctuating conditions will be required to update medical documentation every 12 months;
- » permanent conditions – students with permanent conditions will not be required to re-supply additional medical documentation after the initial appointment with a disability advisor. If new accommodations are required after the initial appointment, students will be required to update their registration and provide additional medical documentation.

Appropriate treating health professionals.

Please note: To receive comprehensive support, medical evidence is required from the following treating health professionals

Low Vision/Blindness

- » Ophthalmologist
- » Optometrist

Mental Health Condition

- » Psychiatrist
- » Registered Psychologist
- » General Practitioner

Medical Condition

- » Medical specialist
- » General Practitioner

Neurological condition

- » Paediatrician
- » Registered psychologist
- » Psychiatrist
- » Medical Specialist

Intellectual and or Learning Disability

- » Paediatrician
- » Registered psychologist
- » Psychiatrist

Acquired brain injury

- » Neurologist
- » Psychiatrist
- » Neuro-psychologist

Physical Disability

- » General practitioner
- » Medical specialist
- » Physiotherapist/Occupational therapist

Hard of Hearing/Deaf

- » Audiologist

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