

Accessibility & Inclusion Support Student Registration Form

No

This Accessibility & Inclusion Support provides assistance to students with a disability or condition who requires reasonable study adjustments and support.

If you wish to access Accessibility & Inclusion Support please complete the information below and return the form to access@csu.edu.au. You are also required to provide current documentation about:

- the severity and duration of your disability;
- its impact on your studies; and
- any recommended adjustment strategies

Download our Health Practitioner Report for your health practitioner to complete about your disability and/or condition. The service will also accept other documentation on a letterhead from your treating practitioner if the information provided covers the information requested in the template.

My details Pronoun **Given Name Family Name** Student ID Preferred B/H No. **Email Study Mode Campus** Course Yes No Are you an Australian/New Zealand citizen or permanent resident? Are you Aboriginal or Torres Straight Islander?

Do you have or are you in the process of developing a NDIS plan? Yes

Disability Details

Please describe your disability/medical condition

How did you find out about our service?



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Indicate how your disability/medical condition may impact on your study and what adjustments you are requesting in the following areas

| Lectures/tutorials/practical classes |
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| Assessment tasks |
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| Residential schools |
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| Professional placement |
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| Examinations |
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| |
| Physical access |
| |
| Format of stocks materials |
| Format of study materials |



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| Library use |
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| Study skills |
| Other |
| |
| Privacy Statement Personal or health information provided to Accessibility & Inclusion Support is protected by the Privacy and Personal Information Protection Act 1998 (NSW). |
| When consulting with Accessibility & Inclusion Support, I acknowledge: that information is accurate and given voluntarily that information is collected by Accessibility & Inclusion Support for the purpose of supporting me in my studies and can be disclosed to relevant CSU staff that my personal details may be recorded in a file that information will be destroyed in accordance with the General Disposal Authorities as set by State Records NSW that information will not be supplied to any person or organisation outside the CSU for any purpose unless authorised by me except where CSU may be legally required to do so that if I am co enrolled with a CSU partner educational institution, I give permission for my DLO to share information with relevant staff at both institutions |
| I understand that I can request Accessibility & Inclusion Support to allow me to view my file and request, in writing, that information be updated if it is incorrect. If I am dissatisfied with the way |

Accessibility & Inclusion Support has handled my personal information I may apply to have the

Date:

matter reviewed by lodging a formal application with the CSU Ombudsman.

No

Student signature (required):

Documentation attached? Yes