



Application Form

Application to administer NAPLAN in an off-site location

Return by Friday 9th February 2024

Please note: **NO EXTENTION** is available for this deadline due to QCAA requirements.

Students enrolled in a school of Distance Education are required to complete the NAPLAN Online tests at one of the following locations:

- Their enrolled school's campus (Cairns SDE)
- The campus of a local school close to their home (host school)

The NAPLAN off-site test is only available to students who are unable to attend a school campus for reasons of **geographical isolation** or **medical illness/injury**.

In order for a student to be eligible to access the NAPLAN off-site test, the following criteria must be met. The student must:

- Be enrolled in a Queensland school of Distance Education
- Be located in Australia at the time of the NAPLAN test window
- Have access to a compatible device with suitable internet and bandwidth
- Be unable to complete the NAPLAN tests at one of the locations listed above for reasons of either geographical isolation or medical illness/injury.

Students completing the NAPLAN off-site test must have a home-tutor (parent/carer/home tutor delegate) to act in the role of test supervisor and who is available to supervise all test sessions. The test supervisor will need to have access to a phone or computer to access emails and communicate with CSDE staff leading up to and on test days. The contact details of the test supervisor are required as part of the application.

- Complete a separate form for **each child**
- Medical Certificate or doctor letter is required with the application for medical reasons
- A search of the closest school will be conducted for geographically isolated applications
- Your application will be sent to QCAA for approval to sit NAPLAN off-site

Steps:

1. Complete this form and save it on your computer.
2. Attach and submit to Naplan@cairnssde.eq.edu.au along with a Medical Certificate if you are applying for medical reasons.



Please tick the box relevant to your circumstances:

My child will complete these tests under home supervision. My application for off-site location is based on:

Geographical isolation

Medical illness/injury. I have attached medical advice signed by a practitioner with this application (scan, photograph or email is appropriate)

Student Information

Surname		First Name	
Connect Teacher		Year Level	
Date of Birth			

Parent Information

Parent Surname		Parent First Name	
Email			
Postal Address			
Post Code		Phone number	
Parent Signature		Date	

NAPLAN Test Location Information

Home address of student (if different to parent)	
Address where student will sit NAPLAN tests	
Name of person supervising tests	
Relationship of test supervisor to student (parent/carer/home tutor etc.)	
Test Supervisor's email	
Test Supervisor's phone number	