



**BOND
UNIVERSITY**

Professional Supporting Certificate

Bond University requires students to provide documentation confirming a disability and / or a health related condition from a relevant professional, as per the guidelines on our website, before a student can be eligible to receive academic adjustments. The information will be used by the Disability Office at Bond University to negotiate appropriate adjustments for students and will remain confidential, in accordance with the student's choice of level of disclosure. This form must be completed by an Australian Qualified Professional. Documentation provided by overseas professionals will be reviewed by Bond University Medical and / or Mental Health Professional staff.

1 Student Details (Students to complete)

Student ID

Surname or family name

Given name(s)

Date of birth

Gender

 Male Female

Phone number

Email

2 Disability Information (Qualified Health Professional to complete)

Disability type

(tick appropriate box/es)

 ADD/ADHD Hearing Illness Injury Learning Medical Mental health Mobility Vision Other

Diagnosis

(Please include a full list of relevant criteria that the student meets for the diagnosis and attach any existing specialist reports)

Diagnostic interview / historical information summary

(Must include, but is not limited to: evidence of onset of impairment; evidence of current impairment; severity of the condition; any other relevant history)

2 Disability Information (Qualified Health Professional to complete) (continued)

Diagnostic interview / historical information summary (continued)

Duration Temporary Ongoing Permanent
Severity Mild Moderate Severe
 Stabilised Unstabilised

Diagnostic procedure/s summary

(Must include summary of procedures used in diagnoses, including but not limited to, examinations, evaluations, questionnaires, and other diagnostic instruments)

3 Predicted functional impact on the student’s capacity to study, complete tasks and participate in a tertiary setting.

(Must include a detailed list of current functional limitations and how the student is limited by the effects of these limitations).

4 Measures currently being taken to treat condition (e.g. medication, therapy).

(Must include details regarding the student’s current treatment regimen; compliance with treatment plan; medication side effects, if relevant; and the student’s response to the treatment, e.g. is condition stabilised).

5 Specific recommendations for reasonable adjustments to enable equal participation relevant to the university learning environment.

The following is a guide only. Recommended accommodations are expected to relate directly to the supporting rationale described in Section 2-4 above.

Adjustments	Yes / no (specify details where applicable)
Coursework: Any assistive technology (by student or university)	
Assignment time extensions	
Examinations: Extra writing time* <small>*Time to be allocated at the discretion of Bond University.</small>	
Extra rest time during exam* <small>*Time to be allocated at the discretion of Bond University.</small>	
Adjustment to print size / font	
Use of computer or other assistive technology	
Scheduling (time of day, number of exams per day)	
Environmental considerations: Smaller room (15)	
Lighting / sound / other	
Access mobility requirements	
Other: Please specify	

Please tick how long the documentation is valid for:

(The following is a guide only but are expected to relate directly to the supporting rational described in section 2-4 above)

Short term: weeks
 6 months
 1 year
 2 years
 3 years
 Permanent

6 Qualified health professional details

Title Family name

Given name(s)

Specialisation

Date of report

Affix card / organisation stamp

Specialist's signature

____ / ____ / ____
Date

Please return completed form together with any other relevant information to:

Disability Officer, Student and Academic Services
 14 University Drive, Robina
 Queensland 4226 Australia
Email: disabilitysupport@bond.edu.au
Fax: +61 7 5595 4091