

# Student Services- Medical / Disability Information Form



*This form is intended for use by students who wish to register with Student Services for academic adjustments.*

Students wishing to access support for their condition or disability at the University of Queensland must provide relevant supporting documentation from a treating health professional on this form, or in a letter or report which meet the guidelines found at [www.uq.edu.au/myadvisor/docs/academic-adjustments.pdf](http://www.uq.edu.au/myadvisor/docs/academic-adjustments.pdf). This document is used as one part of our assessment process in determining appropriate academic adjustments and further information may be requested. Any medical documentation provided will be held confidentially within Student Services and will not be shared outside of Student Services.

Health provider may be contacted if form is incomplete or for verification of authenticity.

## Student Details:

<b>Preferred name</b>		<b>Student number</b>	
<b>Surname</b>		<b>Date of birth</b>	dd / mm / yyyy

## Qualified Health Practitioner to complete remainder of form

<b>Name (print):</b>		Treating professional's stamp
<b>Occupation:</b>		
<b>Signature:</b>		
<b>Date:</b>		
<b>AHPRA Number/ professional registration:</b>		

<b>Diagnosis</b>	<b>Relevant assessment tools/diagnostic criteria used</b> (eg DSM V, ADOS, DASS-21, WAIS-IV)	
<b>Date of diagnosis</b>	<b>Expected duration</b>	TEMPORARY Expected date of recovery: dd / mm / yyyy
<b>Name of person who diagnosed</b>		DIAGNOSTIC REVIEW Review date: dd / mm / yyyy
<b>Profession</b> (e.g. psychiatrist, developmental pediatrician, optometrist)		LONG TERM (10year +)

**Will immediate medical attention be required due to an emergency?**

**No**

**Yes**, complete a Medical Action Plan (MAP) to be shared with UQ Security by the student.

*MAP should include contact details and relevant medical information and actions in event of medical emergency*

**Information relevant to providing reasonable adjustments/ accommodations**

**Impact on studies:** How does the student's diagnosis impact on their studies? (E.g. difficulty with concentration, fatigue, difficulty getting around campus)


**Recommendations for reasonable adjustments in the academic setting**

Recommendations that could assist in providing support to the student, based on the functional impacts outlined above

<b>Examinations</b>	
<b>Classroom / practicals</b>	
<b>Placements</b>	
<b>Additional comments (if relevant)</b>	