Request to sit the 2017 ATAR course examinations outside Western Australia

Closing date Friday, 25 August 2017

ABN 69 769 481 770 | Tax Invoice

PLEASE COMPLETE BOTH SIDES OF THIS FORM

Please use this form if you wish to apply to sit the 2017 ATAR course examinations outside Western Australia. To be eligible, you must be:
- a permanent resident of Western Australia
- enrolled at an approved Western Australian educational institution, and
- unable to sit your examinations in Western Australia for reasons beyond your control.

If your request is approved, you will be required to:
- pay a non-refundable fee to cover the administrative and courier costs relating to your examinations
- be responsible for the payment of the registered international courier charges for the return of each of your examination scripts to Perth immediately following each examination
- locate a suitable venue at a local educational institution or an Australian overseas diplomatic mission to complete your examinations
- nominate a person to supervise the conduct of your examinations. It is preferable that your nominated supervisor be from a local educational institution or from an Australian overseas diplomatic mission and is not a personal friend, and
- accept responsibility for all costs associated with the conduct of the examinations including venue, supervisor and priority international courier costs for the return of examination papers.

The School Curriculum and Standards Authority reserves the right to decline your nominated venue or supervisor and request that you nominate another venue or person.

1. Fees

Non-refundable GST inclusive fee in Australian Dollars:
- Sitting overseas $215
- Sitting interstate $54 per examination (maximum of $200)

2. Candidate details

SCSA student number: [ ] [ ] [ ] [ ]
First name: .................................. Middle initial: ...... Family name: .............................................
Residential address: ........................................................................................................................................
Suburb/town: ...............................................................................................................................................
State: ........................................ Country: ....................... Postal code: ..................................................
Email address: ................................. Telephone: .................... Mobile: .........................................
Name of the examination centre requested: ..................................................................................................
Location of the examination centre requested: ............................................................................................
Address of the examination centre requested: ............................................................................................
Reason for needing to sit your examinations outside of Western Australia: ............................................
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Declaration
I certify that:
1. I am a permanent resident of Western Australia
2. I am studying my courses through an approved Western Australian educational institution
   (please name the school: ........................................................................................................................
3. I am outside of Western Australia for reasons beyond my control, and
4. The person I nominate to be my supervisor is not a close friend or a family member.

Signed: ......................................................... Date: ............................................

HPRM: 2017/1252[v2]
3. Nominated supervisor details (all fields to be completed)

The nominated supervisor should be from a local educational institution or from an Australian overseas diplomatic mission. The person must not be a close friend, or related to you, and must be able to give assurances regarding the security and conduct of your examinations.

Title:  .......  First name: .................................................... Family name: ....................................................
Residential address: ........................................................................................................................................
Suburb/town: ......................................................................................................................................................
State: .................................................. Country: ............................................. Postal code: ........................................
Telephone number: ......................................................  Mobile number: .........................................................
Email address: .....................................................................................................................................................
Occupation: ......................................................................................................................................................

The Authority reserves the right to decline your nominated venue or supervisor and request that you find an alternative venue or nominate another person.

Please advise your nominated supervisor that
- a signed declaration regarding the conduct of the examinations and their suitability to act as a supervisor is required. This declaration will be emailed directly to your nominated supervisor
- the nominated supervisor will be required to supervise the ATAR course examinations at the same time (or as close as possible to avoid communication between other candidates) as the examinations are being conducted in Perth, Western Australia.

4. Payment method

Biller Code: 758003
Ref: Please enter SCSA student number

If paying by BPAY please complete the following:
Date of Payment: _____________________________
BPAY receipt number: ___________________________

Telephone & Internet Banking - BPAY®
Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account. More info: www.bpay.com.au

CREDIT CARD: MasterCard / VISA
Please use this link to pay by credit card.

MONEY ORDER
Money order in Australian Dollar must be issued in the name of the Department of Education. The Authority does not accept personal cheques and bank drafts in foreign currency.

CASH
In person, at Level 2, 303 Sevenoaks Street, Cannington, WA 6107.

5. Form Submission

Please submit the completed form to: robyn.cranley@scsa.wa.edu.au

Further enquiries can be made by contacting

Robyn Cranley
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