



BOTSWANA
EXAMINATIONS
COUNCIL

Application for Access Arrangements 2015

See Part 6 of the Handbook for Centres, and read the notes overleaf before completing this form. If necessary, additional sheets may be attached to this form. This form must be accompanied by psychological assessment or medical report.

1 Examination

Qualification (PSLE, JC or BGCSE)

2 Candidate Details

Centre Number

Centre Name

Candidate Number

Candidate Name

3 Special Needs Type (tick where appropriate)

Visual Impairment	Hearing Impairment		
Low Vision <input type="checkbox"/>	Deaf <input type="checkbox"/>	Physical Disability <input type="checkbox"/>	Learning Disability <input type="checkbox"/>
Blind <input type="checkbox"/>	Hard of Hearing <input type="checkbox"/>	Medical Condition <input type="checkbox"/>	Other(Please Specify below)

4 Access Arrangements Requested (tick where appropriate)

Separate Room <input type="checkbox"/>	Preferential Sitting <input type="checkbox"/>	Rest-Breaks <input type="checkbox"/>	Braille <input type="checkbox"/>	Others: (specify) _____ _____ _____
Scribe/writer/Amanuensis <input type="checkbox"/>	Oral response <input type="checkbox"/>	Enlarged Print <input type="checkbox"/>	Reader <input type="checkbox"/>	
Assistive Technology Devices <input type="checkbox"/>	Modified Paper <input type="checkbox"/>	Coloured Paper <input type="checkbox"/>	Extra-Time <input type="checkbox"/>	
Is supporting evidence attached? Yes <input type="checkbox"/> No <input type="checkbox"/>	(Please specify colour)	(Please Specify)	_____ %	

5 Syllabuses for which application is being made (include options at JCE & BGCSE)

Name of Head of Centre
(Please print)

Date

Signature

Tel:

Cell number

Fax:



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Notes

- 1 This form should be used when making applications for Access Arrangements in advance for candidates who have permanent special needs (eg blind, hearing impaired) or for candidates who have a temporary disability (eg a broken arm). If a candidate is disadvantaged at the time of an examination (eg due to illness, bereavement, etc), an application should be made for Special Consideration. Applications for Special Consideration are made after the examination.
- 2 Applications for Access Arrangements for candidates with permanent special needs should be made when the candidate is entered for the examination.
- 3 Provide details of the qualification (PSLE, JCE or BGCSE), the year and details of the candidate by completing sections 1 and 2 of the form.
- 4 The Access Arrangements being requested should be specified in section 3. The arrangements requested will normally correspond to the statements included in support of the application.
- 5 The nature of the special needs should be described in section 4. Applications on behalf of candidates with long term special needs should be accompanied by supporting evidence in the form of statements from a registered medical practitioner and/or from the Special Education Department of the Ministry of Education and Skills Development.
- 6 Details of the syllabuses (and options if applicable) for which the candidate has been entered should be listed in section 5.
- 7 The signature of the Head of Centre will be taken to indicate that the application has his/her full support.
- 8 Give details of any documents to be attached to the form (eg medical evidence or additional sheets) in the space provided below.
- 9 Once a completed form is received, BEC will provide a written response which will confirm the Access Arrangements which can be made. Heads of Centres should note that no Access Arrangements may be made unless BEC has given this written consent.

Once completed, this form should be sent by mail or fax to:

**The Executive Secretary,
Botswana Examinations Council,
Private Bag 0070,
Gaborone.
Tel: 3650700
Fax 3938257 / 3164203**



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