STUDENT QUESTIONNAIRE: EVIDENCE OF NEED FOR ACCESS ARRANGEMENTS

Name of	Pupil			Tutor											
Date of B	irth		,	Year Group											
Describe	Describe your specific difficulties:														
••••••••															
•••••	,														
What sup	/hat support do you currently receive?														
When we	/hen were you first identified as needing help, and what were the triggers for the														
concern?															
What add	litional su	nnort hav		eived in th	ne nast? F	a 1.1 eur	oport at Primary								
School?			e you lec	eived in <u>n</u>	<u>ie pasi</u> : L.	g. 1.1 30p									
		R													
Have you	received	l access a	rrangeme	ents in you	ır past exc	ıms?									
Yes/no															
Please in	dicate wh	ich arrang	gements y	vou have r	eceived:										
25%	laptop	Reader	Scribe	Prompt	Separate	Rest	Other								
Extra time					room	breaks									
		al time a d		* • • • • • • • • • •											
Yes/no	lave enou	ıgh time d	unng you	r exam?											
If not whi	ich exam	s did you r	un out of	time in?											
		-			•••••										
If you we	re given e	extra time,	did you u	use it?											
Yes/no/se	-														
Please ex	plain:														
	••••••	••••••••••••		•••••••••••	••••••••••••	••••••	••••••								



Did you use any other access arrangements?

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Do you feel that you need any other access arrangements in exams, which you currently do not receive? Yes/no Please explain:

.....

Any other information

••••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	••	•••	•••	••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	•••	••	•••	••	•••	•••	•••	•••
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Please return to the LSC/SEN DEPARTMENT by

