



School Nomination Form

To be completed and signed by the School Principal (or their approved delegate) where the student is applying on the basis of their high school results.

School details:

Name of School:

School Address:

Phone:

Does the following apply to the applicant and/or the school?

Completed Year 12 at a school where very few students completed the examinations for university entry

Completed Year 12 at a 'rural' school, where 'rural' is defined as a distance of >75km from the nearest Central Business District

Applicant details:

Family Name:

Given Name:

Date of Birth:

TISC Number:

Support provided through the School:

Has the applicant already received an adjustment to their final grades or assessment conditions for the same issue they are applying for?

Yes

No

Has the applicant received the following support?

Special Exam Arrangements (or similar):

Yes

No

Sickness/Misadventure Application (or similar):

Yes

No

Other types of assessment or accommodation:

Yes

No

Provide brief details below (attach additional documentation if necessary):

Identifying the disadvantage the student has experienced:

I recommend this student for admission to The University of Western Australia on the grounds that their Australian Tertiary Admission Rank (ATAR) is likely to have been significantly higher had it not been for the following disadvantage/s:

Lack of a supportive study environment in the family home

The need for the applicant to engage in excessive part-time employment to help supplement your family's income

Excessive family responsibilities

Disruption of the applicant's education due to relocation or difficult migrant passage

Applicant's illness or medical condition, which is now over or is abating

Bereavement of a close family member or friend

Other disadvantage not already covered above

School Principal (or approved delegate) supporting statements:

To support the University in assessing this student's application, please provide background information on your student's circumstances. Comment only on issues that are within your realm of expertise.

If preferred, your statements may be typed on official school stationery and attached to this form.

How has the disadvantage identified above, impacted on the student's preparation or performance in the lead up to the WACE examinations (or equivalent)?

Overall, how would you rate the disadvantage/s experienced by the applicant, in terms of impact on their preparation / performance for the WACE examinations (or equivalent)?

Rating:

Mild disadvantage

Moderate disadvantage

Severe disadvantage

Declaration of School Principal (or Approved Delegate):

I support _____ application for UWay on the grounds that they were disadvantaged in their WACE examinations (or equivalent) based on circumstances outlined in this form.

School Stamp

Name:

Position:

Signature:

Date:

**Complete this form and return to the applicant (for inclusion with their UWay application)
OR email this form directly to UWA:**

Email: uway@uwa.edu.au

Please include applicant's full name in subject line.

Visit: <https://www.uwa.edu.au/study/how-to-apply/admission-entry-pathways/uway>
for important dates and deadlines.