

Report of academic merit



Education & Communities

For use by interstate and overseas applicants
for Year 7 entry to selective high schools in

2013

Educational Measurement and School Accountability Directorate

This form is intended for use on behalf of students who are:

- citizens or permanent residents of Australia who normally reside in NSW but are temporarily residing interstate or overseas and
- unable to take the Selective High School Placement Test and
- unable to provide school assessment scores which can be moderated.

Interstate and overseas applicants need to complete both the 2012 online application and the forms in this document.

Completing the forms

Forms to complete	Who	How
Application form	Parent	Apply online between 24 October and 21 November 2011 at www.schools.nsw.edu.au/shsplacement . Leave the school's section blank unless the child currently attends a school which can provide comments. They should not provide marks.
Report of academic merit	Parent to complete page 2, <i>Applicant Details</i>	Complete all details.
	Registered psychologist to complete page 3, <i>Individual Test of general ability</i> after testing	Arrange for a registered psychologist or other qualified practitioner to conduct a WISC IV individual test of general ability. The full psychologist's report must be provided.
	Registered psychologist or other qualified practitioner to complete page 4, <i>Standardised testing of reading and mathematics</i> after testing	Arrange for a registered psychologist, teacher or other qualified person to conduct a standardised test of reading comprehension and a standardised test of mathematics and supervise an unseen writing task. The examiner should complete and sign the relevant sections of the form as well as the relevant sections of the standard application form.

Apply online. Forward this report and other supporting evidence to reach the Unit as soon as possible but no later than Thursday 15 March 2012.

Notes

1. In this document 'parent' includes 'guardian' and 'carer'.
2. Students whose parents continue to live interstate after the 2013 school year begins will be considered for entry to a selective high school only after all eligible candidates from NSW have been placed.
3. If you are currently residing outside NSW but intend returning to NSW to allow your child to sit the test you **do not** need to complete this form. You need only complete the online application and attach a covering letter explaining your plans and providing both local and interstate or overseas contact details. Sample test papers are available at http://www.schools.nsw.edu.au/learning/k-6assessments/ss_sampletest.php.
4. The information provided will be considered by a selection committee and the committee may request, if necessary, further information or testing.
5. Documents entitled 'Selective high schools and opportunity classes: some facts' and 'Selective High School Placement Test' are available from the web site shown below.

Contact details

Selective High School and Opportunity Class Placement Unit

NSW Department of Education and Training

Postal address: Locked bag 5001, Bankstown 1885, Australia

Telephone: 61 + 2 9707 6262

Fax: 61 + 2 9707 6265

Email: ssu@det.nsw.edu.au

Web site: <http://www.schools.nsw.edu.au/shsplacement>

Applicant details

For use by interstate and overseas applicants for 2013 entry.

Student's details

Student's family name: _____

Given names: _____

Date of birth: _____

School attended currently: _____

Current address (interstate or overseas)

Street: _____

Suburb, town or city: _____

Country: _____

Email: _____

Approximate date the student will be
returning to New South Wales: _____

Student's New South Wales address (if known)

Street: _____

Suburb, town or city: _____

Postcode: _____

or intended residential area _____

Telephone number: _____

Email: _____

New South Wales contact person (if applicable and available) with whom a message may be left

Contact person's name: _____

Relationship to applicant: _____

Street: _____

Suburb, town or city: _____

Postcode: _____

Telephone number: _____

Email: _____

Parent's name: _____

Parent's signature: _____

Date: _____

This form must be sent after submitting an online application.

Individual assessment of General Ability

To be completed by a registered psychologist or other qualified practitioner.

Psychologist or qualified practitioner's details

Psychologist's family name: _____

Given names: _____

Position/title: _____

Business address: _____

Suburb, town or city: _____

Country: _____

Postcode: _____

Telephone: _____

Fax: _____

Email: _____

Qualifications and name of professional association(s) and/or society(ies) with which the psychologist is registered. _____

Test details

Version of WISC IV used, e.g. UK or USA e.g. UK or US norms	
Date administered	
Results*	

* (IQ score format, including the Full Scale IQ score, not percentile ranks or descriptions)

Please attach a full psychologist's report. Additional material may be included if relevant.

Comments: (if applicable) _____

Practitioner's signature: _____

Registration number: _____

Date: _____

Note: Parents must identify a suitably qualified psychologist, the Unit is not able to provide recommendations.

Standardised testing of reading and mathematics

To be completed by a registered psychologist, teacher or other qualified person.

Test administrator's identification details

Test administrator's family name: _____

Given names: _____

Position/title: _____

Address: _____

Suburb, town or city: _____

Country: _____

Postcode: _____

Telephone: _____

Fax: _____

Email: _____

Qualifications and name of professional organisation(s) and/or accreditation body(ies) with which test administrator is registered (if relevant). _____

Test details

	Reading	Mathematics
Specific test used		
Date administered		
Results		

Writing task

Administer an unseen writing task. The stimulus should be general in nature.

Allow the student 20 minutes to complete the task.

The task is to be supervised and certified by the administrator as the student's own writing. Please sign and date each written page of the student's writing. The certified original must be attached to this form.

Comments: (if applicable) _____

Test administrator's signature: _____

Date: _____