

Student Eligibility

To be eligible to apply for an externally invigilated examination, a student must meet the following criteria:

- Live more than 100 kilometres from the ACPE campus; and
- Be studying subjects in an **online mode**. (Applications will not be accepted for any students enrolled in on campus mode for a subject).

Invigilator Eligibility

External invigilation **cannot** be overseen by a family member, personal friend or work colleague. The nominated exam supervisor is to be of good standing. Examples of those eligible to supervise are:

- Qualified medical practitioner (e.g. Chiropractor, dentist, GP, nurse, optometrist, pharmacist)
- Justice of the Peace
- Minister of religion, or marriage celebrant
- Teacher
- Librarian
- Professional examination invigilator (e.g. exam centre or at another higher education institution).

External invigilators must agree to undertake this role in a voluntary capacity with no expectation of payment of any kind. The exception to this is if the student chooses to engage a professional examination invigilator (e.g. at an exam centre or another higher education institution), in which case the student will be responsible for any payments or outgoings to the invigilator.

Application process

Eligible students are required to complete Part A of the 'Nomination of External Exam Invigilator Form' (page 2 of this document), and have their nominated exam supervisor complete Part B. Students must then return the completed form to the Exams Department along with the nominated supervisor's proof of credentials or qualification (eg. business card or certification/registration). Lodgements that do not include the nominated supervisor's proof of credential/s or qualification/s will NOT be considered.

at least **one calendar month prior** to the scheduled exam date/period.

- Your application will be assessed by the College and you will be notified of the outcome of your nomination no later than 2 weeks prior to the exam date/period.
- Please note – this process applies only for those subjects in which the student is enrolled in online mode.

SECTION A: To be completed by ACPE student

Personal Details					
First Name		Last Name		Student ID No.	
Course		Phone		No. kms from ACPE Campus	
Nominated Exam Information (Subjects identified from your subject outline requiring a formal exam)					
Subject Start Date		Subject No.		Subject Name	
Subject Start Date		Subject No.		Subject Name	
Subject Start Date		Subject No.		Subject Name	
Student Declaration					
<p>I reside outside 100 km of the ACPE Olympic Park campus and,</p> <p>(a) <input type="checkbox"/> I have previously undertaken an ACPE external examination and nominate the same examination invigilator. The name of my nominated invigilator is: _____ (Page 2 completion not required)</p> <p>(b) <input type="checkbox"/> I have NOT previously nominated an examination invigilator OR I wish to nominate a new invigilator. The name of my nominated invigilator is: _____ (Page 2 must be completed)</p> <p>I understand that my nominated exam invigilator must meet the eligibility criteria and he/she must complete Section B. I understand that all expenses associated with the conduct of an external examination with an independent Exam Invigilator, including but not limited to any venue, facilities, or transportation costs are my responsibility. No payments or reimbursements will be accepted by ACPE.</p> <p>Signature: _____ Date: _____</p>					

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Section B: To be completed by Nominated Exam Invigilator

Invigilator Nomination Details					
Full Name					
Occupation/Title					
Place of work					
Home Address		State		Postcode	
Email Address (print clearly)					
Mobile No.		Alternate Contact No.			
Proposed Examination Venue					

***NOTE**

**Verification of your position/occupation must be provided with this nomination form.
Please provide a copy of your business card or certification/registration to the student.**

Invigilator Declaration
<p><input type="checkbox"/> I agree to act as exam invigilator and supervisor for this candidate's external examination(s).</p> <p><input type="checkbox"/> I agree to be responsible for the secure receipt and handling, and timely return, of the examination materials provided to me by the College, and to conduct the examination in accordance with <i>ACPE's Examination Guidelines and Procedures</i>.</p> <p><input type="checkbox"/> I understand that ACPE will contact me to provide additional information regarding examination arrangements once this nomination has been approved and that the student is responsible for all his/her travel costs.</p> <p><input type="checkbox"/> I confirm that the information provided by me in this form is correct and complete to the best of my knowledge and belief, and that I am not related to, reside or work with, the examination candidate.</p> <p><input type="checkbox"/> I have provided a copy of my verification of my position/occupation/credentials with this nomination form.</p> <p>Signature: _____ Date: _____</p> <p><small>PRIVACY ACPE requires the information you have provided in order to assess your nomination to be an examination invigilator. If you do not provide all of the relevant information, your nomination may not be accepted. Please also note that ACPE may provide your contact details to third party service provider in order to deliver the examination papers to you. Generally speaking, you can access your personal information by contacting the College. If you wish to access your information or have any queries in relation to the matter in which the ACPE handles your personal information, please contact registry@acpe.edu.au or (02) 9739 3333.</small></p>

This form must be lodged at least **one calendar month** prior to the exam date/period:

1. In person: Student Services, Ground Floor, ACPE, 10 Parkview Drive, Sydney Olympic Park
2. By email: ACPEexams@acpe.edu.au as a scanned pdf attachment
3. By post: Registry, ACPE, Locked Bag 2000, Concord West NSW 2138

ACPE Office Use Only
<p><input type="checkbox"/> Form received _____ (Date) <input type="checkbox"/> Verification of position provided Yes / No (Circle)</p> <p><input type="checkbox"/> Nominated examination invigilator approved. <input type="checkbox"/> Nominated examination invigilator denied. (Reason): _____</p> <p><input type="checkbox"/> Student notified of outcome. Date: _____ <input type="checkbox"/> Database updated Yes/No (Circle)</p> <p>Staff Signature: _____ Date: _____</p>