



## Exam Participant Application:

### Acknowledgement and Consent

To: **Murdoch University**

In consideration of Murdoch University ("**Murdoch**") permitting me to sit the Radiological Council of Western Australia ("**Council**") Chiropractic Radiography licencing exam ("**Exam**") I, the undersigned, make the following representations and give the following consent to Murdoch, and agree to the terms and conditions set out in this document ("**Agreement**").

#### Acknowledgement and representations

1. I acknowledge and agree that:
  - 1.1. The Exam is controlled by Council and Murdoch conducts the Exam for Council.
  - 1.2. Murdoch will permit me to sit the Exam subject to (a) me paying Murdoch the applicable fee ("**Fee**") specified in Schedule A (page 2) of this Agreement, no later than two weeks before the published exam date and (b) signing this Agreement.
  - 1.3. Council is responsible for determining whether I pass or fail the Exam based on my Exam results provided to Council by Murdoch.
  - 1.4. Murdoch provides no guarantee Council will provide me with a licence to operate irradiating apparatus and/or electronic products if I sit the Exam.
  - 1.5. If I have any questions in relation to the Exam or my Exam results I will direct my questions to Council.
  - 1.6. My appeal rights in relation to any aspect of my participation in the Exam (including but not limited to a mark awarded for an assessment task or the final result) rest solely with Council and I understand that Murdoch's policies and procedures have no application to this Exam.
  - 1.7. Murdoch may digitally record me sitting the Exam and I consent to this occurring.
2. I consent to Murdoch providing Council with my name and contact details and all my Exam materials including my results and (if so requested) any digital recordings of me undertaking the Exam.
3. I acknowledge and agree that sitting the Exam does not make me a Murdoch student or entitle me to use any of Murdoch's resources other than those specified by Murdoch for use in relation to the Exam.
4. I represent to Murdoch that:
  - 4.1 I have no illnesses, injuries or other conditions that may materially affect me during, or be affected by, my participation in the Exam; and
  - 4.2 I will act responsibly at all times, will not engage in any risky or reckless behaviour, and will follow all instructions of the Exam co-ordinator and take all due care for my own safety and that of my fellow Exam participants.
5. I acknowledge and agree this Agreement contains the entire understanding between Murdoch and myself as to its subject matter. All previous negotiations, understandings or representations concerning the subject matter of this Agreement are merged in and superseded by this Agreement and are of no effect. No party is liable to any other party in respect of those matters.
6. Murdoch has relied on my representations and acknowledgments in this document, and the warranties and releases given by me in this Agreement, in permitting me to participate in the Exam.

#### Exclusion of liability

7. Murdoch disclaims all responsibility and liability (including, without limitation, for any direct or indirect or consequential costs, loss or damage or loss of profits) arising from my participation in the Exam.
8. I acknowledge and agree that to the fullest extent permitted by law Murdoch has no liability to me for damage of any kind suffered or sustained by me in connection with my participation in the Exam.

Signature:

Name (print):

Date:

## Schedule A: Exam fees

The following fee structure applies to clause 1.2 of the Agreement, above. All fees are in Australian dollars, and should be paid via direct deposit to:

Name: Murdoch University  
BSB: 016267  
Account Number: 8373 80279

To ensure you are credited with payment, please provide the following information in the payment reference:

RadCouncil[*your first initial*][*your surname*]. Example: "RadCouncilJCooley"

Please "tick" the box below that applies to your application:

- Restricted Exam (spine and pelvis only): **AUD\$400**
- Extended Exam (extremities and chest only – must have completed the Restricted Exam to be eligible to take this exam on its own): **AUD\$300**
- Both Restricted Exam and Extended Exam (spine and pelvis; extremities and chest): **AUD\$600**
- Resit of any Restricted Exam part(s) (up to 2 parts)\*: **AUD\$200** for each attempt
- Resit of any Extended Exam part(s) (up to 2 parts)\*: **AUD\$200** for each attempt

\*Note: Resit exam eligibility rules:

- (a) Resit exams of individual parts are only available if at least 3 of the 5 parts were passed on the initial attempt. Failure of 3 or more parts means a candidate is ineligible to resit parts of the exam and can only resit the entire exam at the full fee.
- (b) The pass mark for each part is set by Council at 70%.
- (c) Subject to rule (a) candidates have up to 3 attempts (initial plus 2 resits) to pass all parts of an exam (Restricted or Extended), after which the entire exam must be taken for further attempts.