

REQUEST FORM - ONSITE NDIS FUNDED OR PRIVATELY FUNDED THERAPIST

TO BE COMPLETED BY NDIS FUNDED THERAPIST

Details of therapist making request	
Name of therapist	
Company	
Company address	
Phone number	
Email address	
Qualifications held by therapist	
Professional registration details of therapist	
Is the therapist an NDIS registered practitioner? (Y / N)	
Details of student	
Name of student	
Year level / teacher of student	

Are there particular family, social or practical circumstances that are relevant to the request?	
Details of the proposed therapy	
Purpose of the proposed therapy	
Proposed date / time that therapy will be provided	
Will the student be withdrawn from class time for the therapy to be provided? If so, what classes will the student miss?	
Proposed duration and frequency of therapy (e.g. one hour, weekly / daily / monthly)	
Proposed location of therapy (classroom / other area of school / virtually)	

Proposed aims and benefits of the therapy being provided at school / in school time		
<p>Is the therapy time-dependent? If so, provide details</p> <p>For example, is the therapy a medical support that must take place at certain regular intervals each day?</p>		
Attach relevant documents		
Please attach proof of a satisfactory Working with Children Check for the therapist	Tick to confirm the relevant documents are attached	<input type="checkbox"/>
<p>Please attach certificates of currency for the following insurances held by the therapist / company / incorporated association:</p> <ul style="list-style-type: none"> • public liability insurance • professional indemnity insurance 	Tick to confirm the relevant documents are attached	<input type="checkbox"/>
Acknowledgment by NDIS funded or privately funded therapist		
I....., acknowledge and agree that, if the principal approves my request to provide NDIS funded or privately funded therapy on school grounds:	<p>Signed</p> <p>.....</p>	

- I, or my company/incorporated association if I am an employee of a disability service provider, must enter into a **licensing agreement** with the School Council which sets out the terms and conditions of my use of the school premises; and
- subject to the consent of the student's parent(s) or carer(s), I must sign an information sharing deed which requires me to share relevant information about the student with the principal and/or nominated school personnel.

Copies of the relevant licensing agreement and relevant Information Sharing Deed are available upon request.

Print name

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Date