REQUEST FOR NDIA SERVICE PROVISION TO BE CONDUCTED DURING SCHOOL HOURS

This form is to be completed by Parents or Carers in advance of any NDIS service provision commencing in school. Information should be completed after reading the Newcastle School – Guideline for the Provision of Therapy Services in School document. One form may be used for multiple service requests.

	I		·			
Student			Class			
Name:			Teacher:			
Service Provision Requested: Organisation/Therapist Delivering Service:						
- Indian indiana		O i gamba di o il, i i				
☐ Speech	Therapy					
☐ Occupational Therapy						
☐ Physiotherapy						
☐ Psychologist/Behaviour						
□ Other:						
		I				
Expected outcome or goal of therapy service:						
Frequency of Service		Session Time	Session Time		Duration of Service	
	nightly	□ 30 - 45 minutes		☐ Term Two ☐ Term Three		
☐ Monthly ☐ Once or twice per term					☐ Term Four	
Will there be a	clear link between	n the therapy service	goal and an	□ Yes	□ No	
ILP goal?						
Will the therapist be available to attend a Learning Support Team					□ No	
Will the therapist be available to attend a Learning Support Tear Meeting?				□ fes	□ No	
☐ I understand that a decision will be made regarding the provision of						
therapy services during school hours after a Learning and Support Team meeting for my child						
☐ I understand that should no suitable times or learning spaces be				Parent Signatur	Parent Signature:	
available in my child's class thee service cannot commence. The request will be placed 'on hold' and reviewed at the end of each						
semester.				Date:		
				•		
Approved	Declined	On Hold/Review				
			Principal Signature:		Date:	