



REQUEST FORM

FOR NON-DEPARTMENT OF EDUCATION (DE) PROFESSIONALS TO VISIT ARMSTRONG CREEK SCHOOL

The Department of Education (the department) provides educational programs to Victorian government school students.

The National Disability Insurance Scheme (NDIS) provides people with disability with the reasonable and necessary supports to participate in the community and achieve their goals.

On occasion, schools may receive requests from parents/carers to allow an external allied health professionals or NDIS funded therapists to provide support or therapy to their child (the student) on school grounds or virtually during school hours (by request). These requests are made via this completed Request Form.

The department is committed to supporting students and their parents/carers to optimise the benefits offered by the NDIS. Consistent with this commitment, Victorian government schools are encouraged to accommodate students and their parents/carers exercising choice and control in relation to NDIS supports, where practical to do so.

There are several relevant factors that must be considered when determining whether or not it is possible for the school to agree to such requests. These factors are set out in [Responding to requests for NDIS funded therapy in schools – Guidelines for Principals](#).

For the principal to consider such requests, NDIS funded therapists and parents/carers must:

- complete the attached **Request Form**
- have the student's parent/carers sign the **Parents and Carers Consent Form**
- provide the completed forms, and any other relevant documents to the school at the time of making the request.

Like any visitor to the school, the decision to allow non-DE professionals to enter the school grounds rests with the principal and all visitors must adhere to the [Visitors in Schools policy](#) and [Child Safe Standards](#) at all times.

REQUEST FORM

**FOR NON-DEPARTMENT OF EDUCATION (DE) PROFESSIONALS
TO VISIT ARMSTRONG CREEK SCHOOL**

TO BE COMPLETED BY EXTERNAL ALLIED HEALTH PROFESSIONAL OR NDIS FUNDED THERAPIST

Details of therapist making request

Name of therapist			
Company			
Phone number			
Email address			
Therapist profession	<input type="checkbox"/> OT	<input type="checkbox"/> SP	<input type="checkbox"/> BSP
	<input type="checkbox"/> PHYSIO	<input type="checkbox"/> PSYCH	<input type="checkbox"/> PLAY THERAPIST
	<input type="checkbox"/> OTHER:		
Professional registration details of therapist			
Is the therapist an NDIS registered practitioner?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Details of student

Name of student			
Year level		Teacher Name:	
Request for observation visit	<input type="checkbox"/> Term 1	<input type="checkbox"/> Term 2	<input type="checkbox"/> Term 3 <input type="checkbox"/> Term 4

Documents below forwarded to armstrong.creek.school@education.vic.gov.au titled "Attention: Nicole Griffin and Wellbeing Team".

Please to confirm the relevant documents have been forwarded

Current Working with Children Check	<input type="checkbox"/> Current Working With Children Check
Certificates of Currency for the following insurances held by the therapist / company / incorporated association:	<input type="checkbox"/> Public Liability – Therapist Individual
	<input type="checkbox"/> Public Liability – Therapist Company
	<input type="checkbox"/> Professional Indemnity Insurance – Therapist Individual
	<input type="checkbox"/> Professional Indemnity Insurance – Therapist Company
	<input type="checkbox"/> Licensing Agreement – signed by Therapist Company (valid for 3 years)
	<input type="checkbox"/> Information Sharing Deed – signed by Therapist (1 per student)

Acknowledgment by External Allied Health Professional or NDIS funded therapist

I acknowledge and agree that, if the Principal approves this request to observe a student or provide therapy by an external allied health professional or NDIS funded therapist on school grounds:

- 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.
- Like any visitor to the school, the decision to allow external therapists to enter the school grounds rests with the Principal and all visitors must adhere to the [Visitors in Schools policy](#) and [Child Safe Standards](#) at all times.

Name:	
Signature:	
Date:	