Parent/Carer Request for Externally Funded Service Providers



Student Details

Fisher Road School

Student Name:

A new request & documents are required at the beginning of the school year

Completed by Parent/ Carer	Parent/ Carer name:			
Talenii/ Calei	DOB:	Class:		
	I hereby provide written consent to the agreed service delivery arrangement and for the sharing of information related to the provider's services to my child between the provider and the school. I understand I am responsible for notifying the school if I terminate the provider's services and to notify the provider if my child will not be at school on a day scheduled for service delivery at the school.			
External Provider Details	Therapist Name:			
	Organisation:			
Completed by Parent/ Carer in consultation with therapist	Email Contact:			
	Phone No:			
All fields to be	All fields to be completed D.O.B: Or Department of Education no:			
	Role: Speech Pathologist Physio OT Other:			
School Term: □1 □2 □ 3 □ 4				
	Location of Delivery: Classroom Playground Other:			
	Type: Observation (one off) □ Regular sessions □			
	It must fit in with the clas	ermined in consultation with teacher/therapist. s program. Parents to be notified and kept updated parents responsibility to notify the therapist if the child		

Phone: (02) 9981 5222 Fax: (02) 9982 5439

Email: fisherrd-s.school@det.nsw.edu.au Web: www.fisherrd-s.schools.nsw.edu.au Address: 115 Fisher Road, DEE WHY NSW 2099

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Office use only:

□Show the schoo	l some form of photo ider	ntification with date of birth details	
	ed by the provider that me	pletion of DoE Child Protection Training or cets the requirements set out in the external	а
□Provide evidend	ce of Currency for;		
 Workers Com the work themselv injury 	pensation, or, if the provi es, evidence of personal	der is an individual or sole trader performin insurance cover in the event they have a	ıg n
Professional Ir	ndemnity (no less that \$2	million)	
 Public Liability 	y (no less than \$20 million)		
Public Liability	/ (no less than \$20 million)		
Teacher use only	This request supports the following PLP goal:		
Supervisor initial	This request supports another goal that has been discussed with the parent and classroom teacher:		

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