

Dear Parent or Caregiver,

Please find attached information and a request form for external therapy in school.

All information is to be filled out and all relevant documentation attached to be emailed to the school email address williamdeap.school@det.nsw.edu.au

Blue section- Parent or caregiver

Beige section - Therapist

Grey section - Office

Please make sure the following is filled out and attached

Therapist organisation – Name of the company they work for
Therapist full name
Therapist email address
Expected outcome – please note: an educational goal must be identified for therapy in school to proceed
A copy of the students plan goals (NDIS or Private)
Frequency of service request
Length of session required
Duration of the service
Therapists consent to providing input into a review meeting with LaST team
Parents email address
Signed and dated by Therapist and Parent

Please note this is a request only and all therapies must be APPROVED before commencing.

Approval or denial of therapy in school will be given in writing after all legal documentation from the therapy organisation has been submitted and reviewed.