**CONFIDENTIAL**

**Disability Service**

**SUPPORTING DOCUMENTATION FORM – Carers**

A student seeking support as a carer must be able to provide appropriate documentation. This documentation, in addition to a consultation with a Disability Advisor, assists us in understanding the impact of the student’s carer responsibilities on academic performance, and in determining what facilities, services and educational adjustments may be appropriate. It will be stored confidentially within the unit, and not released except where required by law.

A carer is someone who provides significant care for an individual who has an ongoing health condition, disability or is elderly. A student seeking support as a carer must provide appropriate documentation from a **health professional treating the person receiving care.**

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| **THIS SECTION TO BE COMPLETED BY THE STUDENT** **Student Authority for Provision of Information**I, (*print your full name*) …..………………………………………………………………………………… Student ID: ……………………….give permission for the Health Practitioner to provide the information below and any attachments. Student Signature: …………………………………………………….…………………………………….. Date: ………………………………… |

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| **REMAINDER OF THIS FORM TO BE COMPLETED BY PRACTITIONER ONLY****Medical or Health Professional’s Details (see final page for appropriate professional)** |
| **Student Name: ………………………………………………………..****Relationship to person requiring support/care: …………………………………………………….…….****Diagnosis of person requiring support/care: ………………………………………………….…………………………**

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| **Is the condition:*** Permanent
 | * Temporary until: ………………………………..
 |

 ☐ Mild ☐ Moderate ☐ Severe  |
| **Practitioner Name:** |
| **Qualifications/Title:** |
| **AHPRA Provider Number:** | **Phone Number:** |
| **Address/Practitioner’s Stamp:** | **Practitioner’s Signature:****Date:** |
| **Details of student's carer responsibilities**:What are the caring requirements, daily/weekly time commitments to caring? |
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| **Educational impacts and reasonable adjustments:**What are the possible impacts of the caring responsibilities in the learning environment?  |
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| **Documentation requirements based on diagnosis:** Confirmation from a treating doctor or specialist who is treating the person requiring significant care. Please see below a list of approved medical/health professionals based on diagnosis. |

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| Condition  | Approved diagnosing medical/health professional  |
| Medical (e.g. chronic fatigue syndrome, autoimmune disorders, diabetes) | * GP (with a clinical history with the patient)
* Relevant specialist
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| Physical Impairment (e.g. spinal cord injury, amputation, paraplegia) | * Relevant specialist
* GP (with a clinical history with the patient)
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| Hearing | * Registered Audiologist
 |
| Neurological (e.g. multiple sclerosis, Spina bifida, cerebral palsy, acquired brain injury) | * Relevant specialist
* GP (with a clinical history with the patient)
 |
| Mental health condition (e.g. depression, anxiety, bipolar disorder, post-traumatic stress disorder) | * Psychiatrist
* Registered Psychologist
* GP (with a clinical history with the patient)
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| Vision | * Ophthalmologist
* Specialist vision testing service (e.g. Vision Australia)
 |
| Temporary condition or injury (e.g. fractured limbs affecting mobility or capacity to write/type | * Relevant specialist
* GP (with a clinical history with the patient)
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| Learning disorders (e.g. dyslexia, information processing, dyscalculia, dysgraphia)  | * Relevant specialist (see documentation guidelines for additional documentation requirements)
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| Autism spectrum disorder | * Psychiatrist
* Registered Psychologist
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| Attention deficit (hyperactivity) disorder (ADHD/ADD) | * Psychiatrist
* Registered Psychologist
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