

CONFIDENTIAL APPLICATION FORM
For Mahogany Rise Student Development Centre

The SDC offers 2 distinct programs: Intake and Outreach - please specify which one you intend to apply for in section E Statements of Professional Opinion.

Surname: _____

First or Given Name: _____

Date of Birth: _____

Age: _____

Current Year Level: _____

School: _____

Current Funding Level: _____

Dates Assessed: _____

Report Compiled by: _____

Date Referral Submitted: _____

Along with the referral document, the following information is required to support the referral:

- i. CURRENT Cognitive assessment e.g W.I.S.C. 4/5 W.P.P.S.I. 4 (LESS THAN 2 YEARS OLD)
- ii. Appropriate behavioural assessments interpretations to be provided e.g. Achenbach / SDQ
- iii. A current individual learning plan (ILP)
- iv. An current individual behaviour management plan (BMP)
- v. Staged Response Document

Please present evidence that the student satisfies the first criterion for application for Severe Behaviour Disorder funding:

Criterion a) Student displays disturbed behaviour to a point where support in a withdrawal group or special class is required

A. Contact Details

DET Psychologist/Social Worker

Name: _____

Email: _____

Phone number: _____

School Principal Class Officer

Name: _____

Role: _____

Email: _____

Student Well-Being coordinator

(Or main school based person involved with the student apart from classroom teacher)

Name: _____

Role: _____

Email: _____

Phone number: _____

Classroom Teacher

Name: _____

Email: _____

Phone number: _____

Parent(s)/ Carers

Name: _____

Email: _____

Phone number: _____

B. Family Information

Custody Arrangements

Family Structure

Agency Involvements

Parent Knowledge of and Commitment to Placement

Any Practical Impediments to Intake Placement or Outreach servicing

Please report using the following headings (a couple of paragraphs is sufficient for each applicable area)

C. Student Information

Brief Developmental History

Medical History and Current Medications

Social/Emotional History with Achenbach Interpretation

Behavioural History: School/Home/Neighbourhood

Comments on Student Management Plans and Evaluations

D. Referring SSSO and Ancillary service Information (to gain a present and Historical perspective of involvement with SSSO's and other medical services)

SSSO Involvement with Student

Summary of Cognitive and Educational Assessments

Comments on Family Relationships and Interventions or services that may have been involved:

E. Statement of Professional Opinion

Reasons for Behaviour and Learning Difficulties

Contraindications for Placement (Other Disorders)

Requested Form of Placement:

SDC team will make final decision whether intake or outreach is most suitable for the student after reading application and taking into consideration all information.

1. Intake (2 consecutive days at Mahogany Rise Primary School in the unit)

Or

2. Outreach – support in referring school

Recommendation: 1 or 2

Name: _____

Signed: _____

Principal (or delegate)

Name: _____

Signed: _____

SSSO