

 The logo of Parade College features a shield with a cross, a book, and a lamp. The shield is surrounded by a banner at the top that says "PARADE COLLEGE" and a banner at the bottom that says "HONOUR TRADITIONS". The word "PARADE" is written across the shield.	PARADE COLLEGE RTO Division
Disability Support Registration Form	

Registering for support

Parade College – RTO Division, takes equal opportunity and access to education and support seriously. We strive to be inclusive throughout our community.

We have many students who live with a disability, mental health or medical condition. Parade College – RTO Division teachers support student needs, and have experience creating supportive teaching environments where all students have the opportunity to succeed.

If you have a disability, mental health or medical condition, advising us about your condition helps us support you, so you can make the most of your studies at our RTO.

You may have indicated you have a disability on your enrolment form, but you will still need to contact Executive Officer RTO to facilitate support. Registering for disability support is a simple process.

We encourage students to register as early as possible, whether they feel they will need support or not. Students can still register if they have already started their course.

All of your documents surrounding the disclosure of your disability, mental health or medical condition will be kept confidential.

Students requesting services from Disability Support must provide documentation completed by a qualified professional with comprehensive training and experience in the relevant field of health/disability.

Health Professional to complete and sign:

Student Name: _____ Date of Birth: _____

The Health Professional’s information on this form is a formal statement of recommendations for services for a student with disability at Parade College – RTO Division.

Please attach any additional documentation that may assist the student with their studies at the RTO.

*With a diagnosis of a Learning Disability a **detailed adult assessment and report** must be provided by a qualified Educational or Neuro-psychologist.

Name of Health Professional: _____ Registration No: _____

Contact phone number: _____ Date: _____

Please state the disability, medical or mental health condition:

How does the disability/condition impact on the student’s ability to study?

Health Professional’s signature: _____

Health Professional Stamp: Professional’s stamp or Registration Number with contact details (compulsory)

NB For Parade College – RTO Division students any costs incurred as a result of consulting with an external agency will be met by the student’s parent or guardian. For external students undertaking VET courses at Parade College – RTO Division students any costs incurred as a result of consulting with an external agency will be met by the home school or referring agency.