

External Provider Application

This application form is used to request the preparation of an External Provider Agreement for the delivery of services, including Allied Health services, to students of Good Shepherd Lutheran College at the request of parents, carers and/or guardians, on College premises. All applications are subject to review and approval by the College. Submission of this form does not guarantee approval of an agreement, ongoing access to College premises, or allocation of specific spaces, times, or schedules.

Provider Details:

Name of provider:			
Email:		Phone:	

Student Details:

Student name:		Campus:	
Nature of support:			

(e.g. Occupational Therapy, Speech Therapy, Counselling)

Is the External Provider Agreement to be issued to the individual practitioner of the provider organisation?

Yes No

Provider Requirements:

What space is required?			
Preferred day of week:		Preferred time/s:	
Frequency: (e.g. weekly)		End date:	

Required Documentation

To complete the application, the provider must:

- Provide a current copy of their Identity Credentials, Working With Children Card, and any other Certificate of Registration or Authority to Practice in their field to the College.
- Provide a copy of the Parent/Carer/Guardian's consent to work with the child or young person in the knowledge that the College will not provide any supervision of the activities.
- Ensure that if the provider brings an Associate, Practicum student or the like, a copy of their Working With Children Card and Credentials is also submitted to the College.
- Provide a Certificate of Insurance for public liability insurance of not less than \$10,000,000.
- Indemnify the College against any loss, damage, or claim arising from the provider's use of the space.
- Ensure that any financial arrangement and payment of services provided is between the student's family and the provider, except where there is an agreed and planned provision of information sharing that contributes to the learner's Educational Access Plan.

Please submit this completed form, along with required documentation, to jso@gslc.nt.edu.au

The application will be reviewed by the College, who will then generate an External Provider Agreement.