

2025 Request for Service – Advisory Visiting Teacher (AVT) Non-State Schools

BVI

Blindness/ Vision Impairment

DHH

Deaf/Hard of Hearing

PI

Physical Impairment

Date of request:			
School name:		Town/City:	
School Contact		Principal or Delegate	
Name:		Name:	
Role:		Role:	
Phone Number:		Email:	
Email:			
Principal or Delegate Signature:		* By signing this form, the principal guarantees that current and valid parent/guardian consent (within the previous 12 months) has been obtained.	
Student Details			
Student Name:		Year Level:	
Diagnosis:		Class Teacher:	

Reasons for the Request

Reason	Details (please detail specifics)
<input type="checkbox"/> Curriculum support and teaching adjustments	
<input type="checkbox"/> Consultation regarding individual student plans or needs	
<input type="checkbox"/> Disability specific information: impact on functioning and associated adjustments	
<input type="checkbox"/> Assistive technology support or other specialised equipment	
<input type="checkbox"/> Transition planning support	
<input type="checkbox"/> Capability development e.g. (workshop, modelling of adjustments) <ul style="list-style-type: none"> <input type="radio"/> Whole school <input type="radio"/> Targeted – small group <input type="radio"/> Individual 	
<input type="checkbox"/> Other specific requests	

Submit

Note: Please submit your request by opening Microsoft Outlook and clicking submit. This form will populate in Microsoft Outlook as an email for you to send. You do not need to print the document. Alternatively, save and email the document to avt.nssreferral@qed.qld.gov.au

Privacy Notice: The Department of Education collects, uses and discloses personal information in accordance with the confidentiality provision in s.426 of the Education (General Provisions) Act 2006 and the Information Privacy Act 2009. Information collected on this form will be used to provide Advisory Visiting Teacher (HI, PI, VI) services to the student and their school. The information will be kept in a secure location and will only be accessed by relevant departmental personnel. Personal information collected on this form will not be given to any other person or external body unless consent has been provided or the department is permitted or required by law to use or disclose such information.

