

# 2020 School Referral Form



## Section A: Important information

This form is to be completed by the **student's most recent school** in order to determine a student's eligibility for enrolment with Virtual School Victoria (VSV). Please see **page 12** for further information on eligibility requirements.

VSV recognises that shared enrolment is often a viable option in providing a strong framework for sustaining wellbeing supports and learning outcomes for students. For further information, please see **page 53**.

Full-time enrolment at VSV requires the student be withdrawn from the environment of your school and its learning and support systems, to undertake study through online learning platforms from their family home under the supervision of a parent/carer.

Enrolment is for the current academic year only. It is expected the student will return to a local school after this time or will be required to re-apply for enrolment at VSV. VSV does not receive the DET Program for Students with Disabilities funding.

Students enrolled at Virtual School Victoria require supervision by a parent or carer. Supervisors are required to perform a range of duties including:

- facilitating communication between the student and teachers
- ensuring age appropriate adult supervision of the student
- engaging with material provided by VSV both in a written and verbal format
- ensuring that the student has access to a telephone, computer and suitable work area
- supporting the student to engage and participate in the learning program and the wider school community
- ensuring the student submits work in accordance with the prescribed or negotiated submission timetable.

## Section B: Information to determine a student's eligibility and support their enrolment

School Details			
School Name:	<input type="text"/>	Principal:	<input type="text"/>
Region:	<input type="text"/>	Phone:	<input type="text"/>
		Email:	<input type="text"/>
Student Details			
Name:	<input type="text"/>	Phone:	<input type="text"/>
Gender:	<input type="text"/>	Year Level in 2020:	<input type="text"/>
		Length of enrolment at your school:	<input type="text"/>
Date of Birth:	<input type="text"/>	Parent/Carer Name:	<input type="text"/>
Please indicate the student's previous school/s if less than one year:	<input type="text"/>		
Reason for referral to the VSV:	<input type="text"/>		
Has this student been approved for funding through the DET Program for Students with Disabilities?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
PSD category:	<input type="checkbox"/> Physical	<input type="checkbox"/> Visual impairment	<input type="checkbox"/> Hearing Impairment
	<input type="checkbox"/> Intellectual disability	<input type="checkbox"/> Autism Spectrum Disorder	<input type="checkbox"/> Severe Behaviour disorder
		<input type="checkbox"/> Severe Language disorder	
Level of funding approved:	<input type="checkbox"/> Level 1	<input type="checkbox"/> Level 2	<input type="checkbox"/> Level 3
		<input type="checkbox"/> Level 4	

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Evidence of the implementation of a Staged Response and the student's inability to attend a mainstream school

<b>Stage 1 – Early identification and intervention</b>	
When did you last see this student?	
How regularly has the student been attending classes?	
What are the main factors affecting the students attendance and engagement with learning?	

<b>Stage 2 – Intervention strategies</b>	
How has the student's learning program been modified?	
Has a Student Support Group (SSG) been established? Provide details and attach most recent meeting records and plans.	
Has a consultation/referral occurred with Student Support Service Officers or other DET support services? (Please provide name and contact detail's).	
Have agency or community service referrals been made? Provide details (including key names, contact details, outcome of referrals and time frame's).	

<b>School Transition information</b>	
What steps are planned to support the student to return to your school or another appropriate pathway?	
What time frame do you believe will be required to enable this?	<input type="checkbox"/> By mid-2020 <input type="checkbox"/> By the end of 2020 or beyond
<b>Please attach the following documents to this referral (please tick).</b>	<input type="checkbox"/> The student's most recent school report <input type="checkbox"/> Career Action Plan (if available) <input type="checkbox"/> NAPLAN report (if available) <input type="checkbox"/> Individual Learning Plan (if relevant) <input type="checkbox"/> SSG minutes (if relevant) <input type="checkbox"/> PSD Assessment/approval reports (if relevant)

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## School contact To liaise with VSV regarding student progress and possible reintegration to mainstream school

Name:

Role:

Phone:

Email:

## Section C: Endorsement of the enrolment

I recommend withdrawal from mainstream schooling and having a **full enrolment** with VSV.

No  Yes

I recommend a **shared enrolment** with VSV and an appropriate mainstream school.

No  Yes

If yes, what time fraction at VSV? \_\_\_\_\_

I have obtained the consent of the parent/carer or independent student to provide this information to the Department of Education and Training and VSV

No  Yes

I accept that after two terms or six months the referred student's progress will be evaluated for the continued suitability in the VSV program. If after this time the student has been continually unable to engage in their individual learning program, the student will be referred back to their original mainstream school.

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Once completed, this form can be returned to the patient/client, or sent directly to VSV via post, fax, or email:

### Post:

Virtual School Victoria  
315 Clarendon Street,  
Thornbury, VIC 3071

### Fax:

(03) 9416 8487

### Email:

enrol@vsv.vic.edu.au

All information obtained in this form is dealt with in accordance with VSV's Privacy Policy and the Department of Education and Training policies and procedures regarding privacy and record keeping. Queries can be addressed to the VSV Enrolment Office on (03) 8480 000.

# Shared Enrolments



## Between VSV and another Victorian School

In some instances, it may be appropriate and beneficial for students to have their personalised learning and support program split between VSV and a mainstream Victorian school. **This is only possible if the mainstream school agrees to this shared enrolment and nominates a staff member from that school as their VSV supervisor.**

Shared enrolments can provide students with the opportunity to access learning assistance and health/social supports delivered through local schools. It can offer connection to peers and participation in school community activities.

Supervisors of students completing VCE studies will oversee and administer the completion of student SACs and/or Graded Tasks at the school, abiding by the rules set for each assessment. Once completed, the supervisor will need to sign an authentication declaration and send the assessment material back to VSV.

Before submitting this application, a meeting should be arranged with the mainstream school. An appropriate personalised learning and support program should be negotiated, and process for implementation and monitoring agreed. The agreed subjects that will be completed at the mainstream school should be noted below.

What other school will the student be enrolled with while also enrolled at VSV?	
Please tick:	
<input type="checkbox"/> The Principal or their nominee at the above school endorses the shared enrolment. (This needs to be evidenced by the School or Young Adult Referral Form, or by an accompanying letter.)	
<input type="checkbox"/> The subjects/activities that will be completed at the mainstream school have been indicated in the space provided below and the subjects that will be completed at VSV have been indicated on the VSV Subject Selection sheet.	
<input type="checkbox"/> I accept that after two terms or six months the referred student's progress will be evaluated for the continued suitability in the VSV program. If after this time the student has been unable to engage in their individual learning program, the student will be referred back to their original mainstream school.	
Title:	School Supervisor's Family Name:
School Supervisor's First Name:	School Supervisor's School Phone No:
School Supervisor's Email:	(required in order to register for access to the VSV Supervisor Portal)
School Supervisor's Position:	
Which subjects/activities will the student be undertaking at your school?	
Outline any student support services that will be coordinated by your school:	

Please indicate the expected days and times the student will be attending the mainstream school:

Monday	Tuesday	Wednesday	Thursday	Friday

Where will the student be completing their VSV studies?	<input type="checkbox"/> At the mainstream school <input type="checkbox"/> At home <input type="checkbox"/> Other: specify _____
Staff member who has completed this form:	Position:

If you are unsure of the details of the shared enrolment, please contact VSV to speak to the relevant Year Level Coordinator prior to submitting your application. To calculate students time fraction for census purposes please see <https://www.education.vic.gov.au/Documents/school/principals/management/CountingStudentsguidelines.pdf>