



## Additional Student Needs - Support Plan

### Section 1: Identify Support Needs

<b>Student Name</b>	
<b>Training Program</b>	
<b>Date of commencement of program</b>	
<b>Interviewed by</b>	
<b>Date of interview</b>	

Method of consultation     Meeting     Telephone

<b>LLN Skills Assessment Tool Completed</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Name of LLN Skills Assessment Tool</b>		
<b>Nature of Support Needs</b>		
<b>Recommend action</b>	<input type="checkbox"/> Referral to support agency <input type="checkbox"/> Support provided in-house	
<b>If referral – name of agency</b>		
<b>In house support to be provided</b>	<b>Type of support</b>	<b>Details:</b>
	<input type="checkbox"/> Additional learning support outside course hours	who/ when/where/duration/frequency
	<input type="checkbox"/> Extension of timeframe for completion of assessments	Agreed timeframe
	<input type="checkbox"/> Modifications to training environment	Details of changes
	<input type="checkbox"/> Additional resources	Details of resources
<input type="checkbox"/> Adaptive technologies	Details of technology	
<b>Will there be any additional cost to student</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No    If yes provide details:	
<b>Proposed Reasonable adjustments</b>		
<b>Any other relevant information</b>		
<b>Staff member Signature</b>		
<b>Student Signature</b>		
<b>Date</b>		



## Section 2: Implementing Support.

Reasonable Adjustment: to be completed by assessor.

Assessor Name	
---------------	--

Name of Unit	Assessment Task	Date task presented	Details of reasonable adjustment

Add more rows as required.

Any other comments (e.g. extensions of timeframes for assessments).

Signature of Assessor	
-----------------------	--

Signature of Student	
----------------------	--

Date	
------	--

Additional Learning support: to be completed by trainer.

Trainer Name:	
---------------	--

Date of meeting	Details of learning support provided

Add more rows as required.

Any other comment:

Signature of Assessor	
-----------------------	--

Signature of Student	
----------------------	--

Date	
------	--