

FRM012 Student Intervention Strategy Form



SHAFSTON
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Student Intervention Strategy Form

This form is used for the documentation of an intervention plan and details the assistance that Shafston International College provides to students who may be at risk of failing to meet course progression requirements. This form is also used to record the strategies Shafston employs to improve student attendance and/or overall course progression.

Student Details

Student name:		Student ID:	
Course:			
Trainer name:		Campus:	
Course start date:		Course end date:	
Date of intervention meeting:			

Intervention Plan

Outline the reasons for the intervention notice:

Student's Explanation for Academic Underperformance

Recommended strategies and interventions as discussed with the student:

List all agreed actions and deadlines, where applicable. When referencing assessments and units of competency, ensure that full and correct names/codes are used.

How often will this strategy be reviewed?	<input type="checkbox"/> Monthly	On (Date):
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STUDENT DECLARATION

- ✓ *As the student, I recognise that if an agreement is not reached between Shafston and myself during the Intervention Strategy consultation process, I will have a period of 20 days to utilise the Complaints and Appeals process.*
- ✓ *Furthermore, I acknowledge that opting out of the Complaints and Appeals process may lead to Shafston being obligated to report me to the Australian Department of Home Affairs.*
- ✓ *I accept all fees and charges listed on this form and understand that I am required to pay these fees prior to commencement.*
- ✓ *I understand that failing to achieve satisfactory course progress may result in Shafston reporting me to the Department of Home Affairs (DHA).*
- ✓ *I give my consent to implement the intervention strategy which has been formulated to improve my course progress and I commit to all recommendations as listed above.*
- ✓ *I understand that this agreement will be retained for record-keeping purposes and may be referenced by Shafston International College for any future course progress evaluations.*

Student Signature:		Date:	
Student declared before:		Date:	

OFFICE USE ONLY

Name & Position:		Date:	
Signature:			

Plan Reviews - 1

Meeting Date:			
Notes of Discussion:			
Name & Position:		Date:	
Signature:			

Plan Reviews - 2

Meeting Date:			
Notes of Discussion:			
Name & Position:		Date:	
Signature:			