

NOTRE DAME COLLEGE



To Seek To See To Respond

McAuley-Champagnat Programme

Referral to Programme

Before referring a young person to this programme, please read the programme information which has been included in this package.

The Programme information can also be accessed on the Notre Dame College website (www.notredame.vic.edu.au) under McAuley-Champagnat Programme or contact the Director of the McAuley-Champagnat Programme for further information.

Completed referrals are to be sent to:

Mrs Kimberley Tempest
Director of the McAuley Champagnat Programme
Notre Dame College
139 Knight Street
SHEPPARTON VIC 3630
Phone: (03) 58001146
Mobile: 0437982279

Email: kimberley.tempest@notredame.vic.edu.au

On receipt of the referral the referring school / agency will be contacted to arrange an interview time.

Referral Form

to the McAuley-Champagnat Programme

1. Student Details

Date of Referral: _____

Student Name: _____ Year Level: _____ Date of Birth: _____

Indigenous Non Indigenous (Please tick where appropriate)

Address: _____

Phone No's: Home: _____ Mobile: _____

Parent / Guardian Name/s: _____

Address: _____

Phone No's: Home: _____ Mobile: _____

2. Referring Organisations Details

School / Agency Name: _____

Address: _____

Postal Address (if different): _____

Phone No: _____ Fax No: _____

Principal / Agency Case Manager Name: _____

Name and Role of Person Making Referral: _____

Contact Person: _____ Email Address: _____

Phone No: _____ Fax No: _____

f. To the best of your knowledge, has the student, at any stage been assessed with or displayed any of the following:

	Yes Displayed	Yes Assessed	No
Learning Difficulties:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disabilities (Physical, Intellectual etc):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social / Emotional Difficulties:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Harming Behaviours:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aggressive / Violent Behaviour:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homelessness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have ticked Yes to any of the above, please provide details below:

If you have ticked yes to any of the points in E and/or F it is essential that you attach copies of documentation and / or assessments.

A release of confidential information form is attached if required.

4. Agreement of Support from Referring School or Agency (Complete either 4a or 4b)

4a. Referring School Agreement

A condition of accepting a young person into the McAuley-Champagnat Programme is that the referring school accepts and supports the following:

1. The referring school undertakes to accept the referred student back into that school at the conclusion of the student's involvement in the McAuley-Champagnat Programme.
2. The exact date of the student's return will be negotiated between the Director of the McAuley-Champagnat Programme and the referring school in consultation with the student, and the student's family and/or agency.
3. The referring school agrees to contribute to the funding of the referred student's placement in the programme by making a pro-rata contribution (based on the student's length of stay in the programme) of the per capita state and / or federal funds received by the referring school.
4. The referring school undertakes to provide or fund agreed related support services (such as psychological / educational testing, counseling etc.) to the referred student while in the McAuley Champagnat Programme.
5. The referring school agrees to provide copies of any educational, psychological, medical etc. assessments, management history and academic results in relation to the student.
6. The referring school agrees to appoint a mentor for the student. This mentor will meet with the student on a regular basis (usually once a fortnight) for the duration of the placement in the McAuley-Champagnat programme.

**Principal of referring
schools Endorsement:**

Date:

4b. Referring Agency Agreement

A condition of accepting a young person into the McAuley-Champagnat Programme is that the referring agency accepts and supports the following:

1. The referring agency undertakes to contribute to the funding of the young person's placement in the McAuley-Champagnat Programme.
2. The referring agency undertakes to provide agreed related support services (such as supervision, psychological / educational testing, counseling etc.)
3. The referring agency agrees to appoint a Case Manager for the young person. This Case Manager will meet with the young person on an agreed regular basis (usually not less than once per fortnight) for the duration of the placement in the McAuley-Champagnat Programme.

**Agency Manager's
Endorsement:**

Date:

5. Agreement for provision of Mentor

Please note: it is essential that this form is completed and returned with the referral application.

Student: _____

School: _____

Nominated Mentor: _____

Current Role: _____

Contact Telephone Numbers: _____

Contact Address: _____

Email: _____

The school mentor is expected to:

- Already have an established and positive relationship with the student.
- Become the student's link with the referring school/agency.
- Have regular contact (at least once a fortnight) with the student for the period of placement in the McAuley-Champagnat Programme.
- Attend relevant meetings where possible.
- Maintain the relationship with the student on his/her return to the school.

I _____ have read and understood the expectations of the role of Mentor.

I am willing to undertake this role for _____ (student).

Signature:

Date:

Endorsement of Principal (from referring school):

Date: