

Intervention Plan Form



First Name:	
Surname:	
Date:	
Training Product:	Code and Title
Week of Course:	

To be used by staff members for reporting any counselling undertaken with a Student or when a Support Service is recommended to a student. Complete the form and return to the RTO Manager

Comments:

Discussion of progress:

Clarifying areas of weakness

Action areas for improvement



Goals and Strategies

Support Services Recommended

Intervention Strategies	Transition Support	Study Skills Support
<input type="checkbox"/> Transition support <input type="checkbox"/> English language support <input type="checkbox"/> Welfare support required <input type="checkbox"/> Reduction in course load <input type="checkbox"/> Increase contract duration	<input type="checkbox"/> Accommodation issues <input type="checkbox"/> Cultural shock, home sickness <input type="checkbox"/> Local customs and etiquette <input type="checkbox"/> Balancing work commitments and studies	<input type="checkbox"/> Referred to Study Corner <input type="checkbox"/> Tutoring on subject for reassessment <input type="checkbox"/> Recommend another UOC <input type="checkbox"/> Academic referencing and plagiarism

Student Agreement with Intervention Plan

I declare that I have met with my Trainer and/or Academic Manager, whereby we discussed a strategy within the Intervention Plan to assist me with my course progress and attendance. I sign this agreement below to confirm that I agree with the Intervention Plan and confirm that I will, with the assistance of my Trainer, follow the Intervention Plan.

I understand that if I DO NOT follow this plan and/or seek further assistance from my Trainer, that I am putting myself at risk of Rosewood International College having to report me to the Department of Education and Training for not meeting the minimum requirements, for either Attendance or Course Progress, in accordance with my Visa requirements and that the next step may be that I will receive an "Intent to Report" letter.

Student's
Name:

Student's
Signature:

Date:

Academic Manager
Name:

Academic Manager
Signature

Date:
