

# Health Practitioners Statement

Disability support services at La Trobe University provide information, support and resources to students with disabilities and ongoing medical conditions to enable these students to participate fully and equally in all aspects of university life.

In order for disability support services to be accessed, a health practitioner's statement is required. This statement will assist the University in verifying a disability or health condition and enable the University to provide the most appropriate supports to reduce the impact of these conditions on study.

This statement should comply with the requirements outlined in the *Documentary Evidence Guidelines for Students with Disabilities and Long Term Medical Conditions*.

Consent has been provided for the release of information from your service, as indicated below.

**Student Authority for the provision of information (to be completed by the student)**

Student Name:..... Student ID Number:.....

*I hereby authorise the Equality and Diversity Centre, La Trobe University to obtain information from my health practitioner. I also authorise the Equality and Diversity Centre La Trobe University to seek further information from my health practitioner as required. I hereby authorise my health practitioner to release the information below and in any attachments to Equality and Diversity Centre, La Trobe University.*

Student signature:..... Date:.....

The following sections are to be completed by a qualified health practitioner.

Name of Practitioner:.....

Profession:.....

Phone number:.....

**Professional's stamp (compulsory)**

**Provider  
Number:**

**Nature of disability / medical condition / injury:**

.....  
 .....

**Please indicate whether the disability / condition is:**

Permanent

Temporary

Short Term – If so please provide a time frame:.....

**Please indicate whether the disability / condition is:**

Fluctuating

Constant

Improving

Progressive

**Please comment on the impact of the student's disability / condition on the following:**

a. The impact on reading

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b. The impact on writing

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c. The impact on mobility

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d. The impact on memory and concentration

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e. The impact on communication

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f. Impact on participation in practical sessions e.g. laboratory classes, clinical placements and field trips (if relevant)

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g. The impact on Preparation of Essays and Assignments

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h. The impact in an examination situation

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**Effects of treatment** *(please indicate if there are any side effects to treatment/ medication which are likely to impact on the student's study).*

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**Recommended strategies for minimising the impact of the condition on study (please tick):**

- Auslan interpreters
- Note taker in lectures/tutorials
- Modifications and support in lab classes, clinical placements
- Course material in alternative formats (eg audio format, large print, Braille)
- Extensions on assignments
- Streamlining reading material
- Ergonomic equipment
- Alternative technology (e.g. voice activated software etc.)
- Other - please explain

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**Recommended strategies for minimising the impact of the condition in an exam situation** (*eg need for extra reading time; extra writing time; rest break; permission to take in medication, food or drink; use of equipment such as a computer, ergonomic furniture; separate venue or other support/requirements*).

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**Please attach any additional documentation that may be beneficial in accommodating the student at university.**

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**Signature:** ..... **Date:** .....

**Equality and Diversity Centre Staff Contact Details:**

**Albury-Wodonga Campus**

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