

## **Access Plan Medical Practitioner Report**

TAFE SA provides services, study and assessment accommodations/adjustments for students with disabilities or health conditions which aim to reduce the impact of these conditions in a learning environment. To assist TAFE SA in providing the most appropriate support for this student, could you please provide the following information in relation to the student whose agreement to this release of information is below:

Note: This form is not used for medical	Student ID		hereby give aut	-	
Medical Practitioner		to releas	ease information relating to my		
disability/health condition to Stude	ent Services at TAFE SA.				
Student's Signature				2020	
Me	edical Practitioner to	o complete	this section		
Nature and duration of the disabil	ity or health condition:				
Impact on Reading (visual) or Head	ring:				
Impact on Writing:					
Impact on Mobility:					
Impact on Concentration or Cogni	tive Processing:				
Impact on Assessments:					
Recommended strategies to minimise the impact of the disability/health condition:					
Print Name:		Profession:			
Address:					
Phone:	Email:				
Medical Practitioner's Signature:					2020