



2025 NDIS – Checklist

Name of requestor: _____

Student: _____ Year level: _____

NDIS provider: _____

| | |
|---------------------------------|---|
| Request form returned completed | Yes/ No |
| NDIS provider details completed | Yes/ No |
| NDIS certification | Bluecard Photo ID First aid certificate Worker compensation insurance Professional indemnity insurance - \$2 million per claim Public Liability Insurance – \$20 million per claim |
| Principal Agreement | Yes / No Reason: |
| Access agreement completed | Yes / No |
| Fee structure | \$20 per hour \$40 per hour – Total cost- |
| Room allocation | |
| Invoice sent | Yes /No |
| Invoiced Paid | Yes / No |
| College Induction completed | Mandatory training Emergency procedure |