SYDNEY iNSTITUTE of BUSINESS and TRADES
RTO code 46286 | CRICOS code 04291G
Suite 11, 197 Prospect Hwy, Seven Hills, NSW 2147 | ✆ +61 469 336 396 | ✉ info@sibt.edu.au
ABN 60 658 420 707 | ACN 658 420

INTERVENTION STRATEGY (STUDENTS AT RISK)

Use this form to record the support agreed with a student who has been identified as at risk of not making satisfactory course progress or completing within the expected course duration. Complete the plan with the student and review it by the agreed date.

STUDENT AND STAFF DETAILS

Student name:		**Student ID:**	
Course:		**Date identified:**	
Email:		**Phone:**	
Identified by:		**Position/title:**	

REASON STUDENT IS AT RISK

Reason identified:	☐ Poor attendance or participation ☐ Unsatisfactory course progress ☐ Non-submission or late submission of assessments ☐ Repeated unsuccessful assessment attempts ☐ Personal, wellbeing, language or learning support needs ☐ Other: _____
Details and records reviewed:	*Briefly explain the concern, including relevant dates, units, attendance or assessment information.*

INTERVENTION ACTION PLAN

Support actions agreed:	☐ Meeting/counselling with student support staff ☐ Study plan and clear progress targets ☐ Extra class, tutorial or make-up session ☐ Assessment support or revised submission schedule ☐ Language, literacy, numeracy or study skills support ☐ Meeting with trainer/assessor ☐ Course load, deferral or withdrawal discussion ☐ Referral to an external support service ☐ Other: _____
Actions, responsibilities and due dates:	*Record what the student and SiBT will do, who is responsible, and the date each action is due.*
Student expectations:	*Record the attendance, assessment and communication expectations agreed with the student.*
Review date:	

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FOLLOW-UP REVIEW AND RECORD

FOLLOW-UP REVIEW

Review date:	
Progress since intervention:	☐ Improved ☐ Partly improved ☐ No improvement
Actions completed:	*Summarise the actions completed by the student and SiBT.*
Further support required:	☐ Yes ☐ No If yes, provide details below.
Further support and next actions:	
Next review date:	
Review outcome:	☐ Intervention closed - satisfactory progress ☐ Continue intervention and monitoring ☐ Escalate under the Course Progress and Attendance Policy

ACKNOWLEDGEMENT

Acknowledgement: The intervention actions and review date have been discussed with the student, and a copy of this plan will be provided to them.

Student name:		**SiBT representative:**	
Signature:		**Signature:**	
Date:		**Date:**	

OFFICE USE ONLY

Student notified of at-risk status:	Date: _____ Method: ☐ Email ☐ Meeting ☐ Other
Records completed:	☐ Recorded in Course Progression Register ☐ Intervention strategy uploaded to student file ☐ Meeting/counselling notes attached ☐ Student provided with a copy of this plan

PRISMS / reporting status:	☐ Not applicable at this stage ☐ Intention to Report process initiated (if applicable) ☐ Other PRISMS action recorded: _____
Completed by:	
Signature and date:	

Recordkeeping note: File the completed form and supporting records in the student file and update the relevant register.