Attachment C: Parent/Carer Certification Form

Intervention Support Program

Education Program and Transition to School

Young Children with Disabilities (YCWD) Component

1. **Education Program**

Insert name of Child

Insert name of Applicant Organisation

2. **Transition to School**

Signature of parent/carer

Date

Please note: This form is to be kept on each child’s file and must be available to ISP on request.