

Preschool Field Officer Continuing Support Referral Form 2025

For use in Term 1 only

The Preschool Field Officer (PSFO) program is a targeted and time limited capacity building program. All Victorian funded kindergarten programs are eligible to receive PSFO service to support the access, inclusion and participation of children with additional needs in a kindergarten program. The PSFO does not directly deliver intervention to a child within the kindergarten setting but acts as a coach to the early childhood teacher.

Who is the client?

The educator(s) at the kindergarten service are the focus of the PSFO support. Whilst there needs to be a specific child referred, the purpose of the support is to guide, mentor and coach the educator to ensure they have the skills to best support the needs of the individual child.

Who is eligible for PSFO support?

- ❖ The educator of any child attending a funded 4 year-old kindergarten program identified as having additional support needs.
- ❖ The educator of any child attending a funded 3 year-old kindergarten program identified as having additional support needs.
- ❖ The educator of any child attending the funded Early Start Kindergarten program identified as having additional support needs.
- ❖ The PSFO program defines children with additional needs as a child presenting with developmental concerns. Developmental concerns may be associated with any area of children's development. Children with additional needs resulting from trauma are also eligible.

PLEASE NOTE: As directed by DET in the PSFO Guidelines, if a child is already supported through the NDIS, it is expected that the educator in consultation with the family will seek support from the NDIS provider(s) in the first instance. NDIS providers can provide strategies that support the child to participate meaningfully in learning experiences with their peers that are consistent with strategies being implemented across other settings where the child spends their time. If the educator has made all efforts but been unable to engage these supports, PSFO support can be sought.

Who funds the PSFO service?

The Department of Education and Training (DET) funds the PSFO service. There is NO COST to services or the families to access this support.

Who completes the PSFO Referral form?

This form is designed to be completed by the parent/carers and the educator together.

Why is this information required?

To access the PSFO service, the educator needs to identify an individual child that they need capacity building support to ensure that the child has the best opportunity to develop through the kindergarten program. The information provided supports the PSFO to understand the needs of the educator and to develop a plan to support the diversity of all children. The information may also be collected and disclosed to the Department of Education and Training (the department) for specific purposes, including for the departments auditing, monitoring and reporting.

Who signs the PSFO Referral form?

The form must be signed by both parent/guardians of the child unless there is a reason why both parents cannot sign. This could include: court orders, incarceration, death or no contact for 12 months or more. This form must also be signed by the educator.

**Preschool Field Officer Program
 Request for Continuing Support 2025
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Name of Previous PSFO (2024):

Child/Kindergarten Details

Child's Name:		DOB:			
Name of Centre:					
Name of Teacher:					
Email:		Phone:			
Other Educators:					
Days & Times Child Attends					
	Monday	Tuesday	Wednesday	Thursday	Friday
Start					
Finish					
Teacher's Non-Contact Times					
	Monday	Tuesday	Wednesday	Thursday	Friday

Please indicate what supports you are seeking from the PSFO Service in 2025, including any changes in family circumstances or additional supports:

Parent/Carer Details

The Department of Education and Training (DET) state that both parents/carers must provide their details and sign the referral form.

Child lives with Father Mother Both parents Other _____

If Parent/Carer unable to complete and sign the form, please indicate the reason:

Parent/Carer 1

Full name:

Email:

Phone No:

Signature Parent/Carer 1:

Date:

Parent/Carer 2

Full name:

Email:

Phone No:

Signature Parent/Carer 2:

Date:

Educator Declaration

I, _____, declare that I have completed this individual referral form with the child's parent/carers and that they understand the purpose of the ongoing involvement of the PSFO program, and I have their informed consent for the release of information.

Signature:

Date:

Please email the completed referral form to: PSFO@gateways.com.au