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| Transition from school for students with disability |
| Requirements |
| Complete and return both sections of the form:* Project completion report 20XX
* Financial Acquittal statement 20XX
 |
| By: | Project must be acquitted by Friday Week 9 Term 2 20XX |
| To:  | Senior Education Advisor, Transition from SchoolStudent Wellbeing and InclusionDepartment of EducationGPO Box 4821, Darwin, NT 0801sesupport.det@nt.gov.auPhone: 8944 9335 |
| Project completion report 20XX |
| School |  |
| Project title |  |
| Project outcomes |
| Outcome | Achievement of outcome |
|  |  |
|  |  |
|  |  |
|  |  |
| Transition planning meetings held |
|  |
| Overall project strengths |
|  |
| Overall project weaknesses |
|  |
| Overall project value – to your students/school or to work transition/curriculum/school/community etc |
|  |
| Financial acquittal statement 20XX |
| School |  |
| Project title |  |
| Grant received | $ |
| Statement of expenditure |
| Details of expenditure items | Cost $ |
|  |  |
|  |  |
|  |  |
|  |  |
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|  |  |
|  |  |
| Total |  |
| Balance, if any |  |
| Any unspent funds are to be returned to Transition from School, Student Support. Any profits generated are to be returned to the school budget. |
| I certify: That the information shown in this acquittal statement is an accurate summary of receipts and payments for the project. | Yes/No |
| Principal name |  |
| Signature |  |
| Date |  |
|  form |
|  |