

Authority to Act as an Advocate

Our clients may have the support person of their choice accompany them through any procedures or negotiations with our service. Parents or legal representatives are accepted as client support people without the need for completion of this form.

This form is to be used when a client chooses to nominate an informal support person (friend or significant other) or an individual or organisation to advocate on their behalf, or change their nominated support person/advocate. The intention is to ensure clarity between the service and the nominated individual/agency about their role.

A support person acts to support the client in his or her negotiations with our service. This may include interpreting, providing assistance with communication, and/or advising on the service user's needs. An advocate speaks on behalf of the service user, to ensure their best interests are represented.

A client may choose to have both an informal support person and an advocate, depending on the circumstances concerned. When completing the form, please strike out the term that does not apply. If both an informal support person *and* an advocate are being nominated, please complete a form for each.

I, nominate
 To act as my support
person/advocate,

Effective from:

His/her contact details are:

Name:

Address:

City: Post Code:

Telephone Home: Mobile:

Email Address:

Signed: _____ Date:

(Signature of Client/Legal Representative)