

Community Education Request Form

Thank you for requesting an information session with the Office of the Public Guardian's Stakeholder Engagement Team. If you have any questions, please do not hesitate to contact us on 1300 361 389.

Please email the completed form to pg.engagement@opg.nsw.gov.au

Your details

Name _____ Position _____

Organisation _____ Phone _____

Email _____

Have we presented a session for you before? ☐ Yes ☐ No

If your session will be held in rural NSW, would you consider contributing to the travel costs? ☐ Yes ☐ No

Session information

Date _____ Alternative Date _____

Start time _____ Finish time _____

(Most sessions are scheduled for 1 hour)

Venue (including building, room, etc) _____

Reason for request (eg: staff training) _____

Topics

To get the most out of a session, please select the topics you are most interested in.

- | | |
|---|---|
| <input type="checkbox"/> Role and functions of Public Guardian | <input type="checkbox"/> Enduring Guardianship (EG) |
| <input type="checkbox"/> Person Responsible guardianship | <input type="checkbox"/> Alternatives to |
| <input type="checkbox"/> Advance Care Planning (ACP) | <input type="checkbox"/> Capacity |
| <input type="checkbox"/> Part 5 – medical & dental treatment ACP) | <input type="checkbox"/> (Wills, Power of Attorney, EG, |
| <input type="checkbox"/> Supported & Substitute decision making (UNCRRPD) NDIS | <input type="checkbox"/> Guardianship and |
| <input type="checkbox"/> Supported Decision Making & your rights (for people living with disability & their supporters) | |
| <input type="checkbox"/> Difference between Public Guardian, Guardianship Division of NCAT, NSW Trustee & Guardian | |

Other: _____

Attendees

Number of attendees _____

(Minimum 15 – if you have less attendees, please ring us to discuss on 1300 361 389)

Background of attendees _____

(E.g., Health professionals, seniors, legal professionals, coordinators, carers, people with disability)

To ensure we meet your needs, let us know if you will require an interpreter for the session, or if you've organised an interpreter to be present.

- ☐ Yes, we have organised an _____ interpreter
- ☐ Yes, we would like to you organise an _____ interpreter

Equipment

Please select what equipment will be available to us during the session:

- ☐ Whiteboard ☐ Projector ☐ TV/DVD player

Parking

Is parking available on site? ☐ Yes ☐ No

Please provide details: _____

Any other information: _____

By submitting this form, you understand that NSW Trustee & Guardian collects, stores and uses personal and health information to carry out its statutory functions. To learn more visit www.tag.nsw.gov.au/privacy