

Health Care Details – Exemption from Income Management - FORM

Note:

- **This form may only be used for children under the compulsory school-age**
- *The information on this form is used to provide Centrelink with the required evidence when clients are seeking an exemption from income management*
- **The form must be completed by a Registered Health Practitioner**
- *A **copy** of the form must be retained in the client medical record (scanned into PCIS)*
- *The **original** form must be handed to the client as required by Centrelink*

Family Details

Child's name	
Child's Date of Birth	
Parent/Carer Name	

Health Checks and Immunisations

Please circle

Yes / No	Has received all age-appropriate immunisations <i>This includes:</i> - children who have a medical reason for <u>not</u> receiving the appropriate level of immunisation OR - children for whom a conscientious objection form has been lodged with the Aust Childhood Imm Register (ACIR)
Yes / No	In the last 12 months has completed the age-appropriate health checks
Yes / No	Has undertaken any relevant and available medical therapy (if applicable) <i>For example Speech Therapy, Physiotherapy, Occupational Therapy</i>

Declaration

I _____, declare that the
(Name of Registered Health Practitioner)
information provided is true and correct.

Please print

Position	
Health Centre Name	
Signature	
Date	