



Individual Support and Adjustment Plan (ISAP)

Purpose of the Form

The **ISAP** is used to identify and document the specific adjustments, support strategies, and monitoring processes required to ensure equitable access to training and assessment for VET students with disabilities, learning needs, health conditions, or other personal circumstances. This supports compliance with Outcome Standards 2.3 (Training Support), 2.5 (Diversity and Inclusion), and anti-discrimination legislation.

It enables Elan Colleges to provide tailored support while ensuring academic integrity and learner success.

Instructions to Complete the ISAP

Section	What to Do
Client Information	Enter the student's full contact details, emergency contact, and any external support coordinator (if applicable).
1. Overview of Support Needs	Provide a brief summary of the student's support requirements (e.g. medical, psychological, or disability-related). Use information provided by the student or verified support documents.
2. Key Areas for Adjustment and Support	Tick and describe relevant types of support (e.g. physical access, flexible assessments, communication tools). Be specific about needs.
3. Goals and Objectives	List clear and achievable support goals (e.g. "Complete all assessments with extra time"). Use SMART goal format where possible.
4. Strategies and Interventions	Describe what adjustments will be made, who is responsible for implementing them, and the timeline for delivery. Use one row per strategy.



Section	Details
Client Information	
Name	
Date of Birth	
Address	
Contact Information	
Emergency Contact	
Support Coordinator (if applicable)	
1. Overview of Support Needs	Brief summary of medical, psychological, or disability-related factors that require attention and accommodation



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2. Key Areas for Adjustment and Support	
Physical Adjustments	(e.g., mobility aids, access modifications)
Educational Adjustments	(e.g., alternative formats, extra time for assessments)
Social and Emotional Support	(e.g., therapy, group activities)
Communication Needs	(e.g., language support, assistive technology)
Behavioral Supports	(e.g., strategies for managing challenging behaviors)
3. Goals and Objectives	
Goal 1	
Goal 2	
Goal 3	
4. Strategies and Interventions	
Strategy 1	
Description	
Responsible Party	
Timeline	



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Strategy 2	
Description	
Responsible Party	
Timeline	
5. Support Resources	
Resources/Tools	(e.g., equipment, therapy sessions, caregiver support)
6. Progress Monitoring	
Frequency of Review	
Assessment Methods	
Person Responsible for Monitoring	
7. Emergency or Crisis Plan	
Emergency Procedures	(e.g., safety measures, contact details for emergency services)
8. Review and Update Schedule	
Review Date 1	
Review Date 2	
Review Date 3	
9. Signatures	
Client/Guardian Name	
Signature	
Date	



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Support Coordinator/Provider Name	
Signature	
Date	

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