



FM-MS03

## Nomination of Support Person / Advocate

Members may have a support person of their choice accompany them through any procedures or negotiations with our service. A support person acts to support a Member in his/her negotiations with The Tertiary PLACE. 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.

This form is to be used when a Member 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 (parents or legal representatives are accepted as support people without the need for completion of this form). Completed forms should be included in the individual's file and reviewed with the Member and/or support person when the ISP is reviewed. A service user may choose to have both an informal support person and an advocate. If both an informal support person *and* an advocate are being nominated, a form needs to be completed for each.

This form assists in gathering evidence against service standard indicators 1.4, 2.3, 3.3, 4.4, 5.2, 7.4.

### **NOMINATION FORM**

I \_\_\_\_\_ nominate \_\_\_\_\_  
(Member name) (Name of support person / advocate)

to act as my \_\_\_\_\_, effective from \_\_\_\_\_ . His/Her contact details are \_\_\_\_\_  
(date)

Address	
Phone	Email

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Signature of Member or their legal representative)

### **CHANGE OF NOMINATION FORM**

I \_\_\_\_\_ wish to change my nominated \_\_\_\_\_ .  
(Member name)

Effective from \_\_\_\_\_, I want my interests to be represented by \_\_\_\_\_  
(date) (Name of support person / advocate)

whose contact details are \_\_\_\_\_

Address	
Phone	Email

Signed \_\_\_\_\_ Date \_\_\_\_\_  
(Signature of Member or their legal representative)