

Core Supports Service Agreement

Participant Name: _____
NDIS Number: _____
Date of Agreement: _____

Funding Management

The participant's Core Supports funding is managed by (please select):

- NDIA (Agency-managed)
- Plan-managed – Plan Manager Name: _____
- Self-managed – Participant/Representative Bank Details: _____

1. Purpose

This Service Agreement is made under the National Disability Insurance Scheme (NDIS). It sets out how Core Supports will be provided and the responsibilities of both the participant (or their representative) and the provider.

2. Supports and Services

The provider will deliver the following Core Supports funded in the participant's NDIS plan:

- Assistance with Daily Living
- Assistance with Social and Community Participation
- Transport (if funded in plan)
- Consumables (if applicable)

Hourly Rate / Unit Price: As per the current NDIS Pricing Arrangements and Price Limits.

3. Schedule of Supports

Support Item (Line Item)	Description	Frequency	Unit Price (as per NDIS Price Guide)	Allocation
_____	_____	_____	_____	_____

(This schedule can be updated if the participant's NDIS plan changes.)

4. Responsibilities

Provider responsibilities:

- Deliver supports in line with the NDIS Practice Standards and NDIA guidelines.
- Communicate openly and honestly in a timely manner.
- Issue invoices in line with NDIS requirements (with support dates, hours, and line items).
- Respect privacy and confidentiality.

Participant responsibilities:

- Provide accurate and up-to-date information relevant to supports.
- Notify the provider of any changes to the NDIS plan or contact details.
- Give at least 24 hours' notice if unable to attend scheduled appointments.
- Work with the provider to achieve their plan goals.

5. Plan Management and Payment

- Supports will be claimed directly from the NDIS plan through the NDIA, a Plan Manager, or paid by the participant (if self-managed).
- The provider will claim using the correct line item from the participant's Core Supports budget.

6. Cancellation Policy

Less than 24 hours' notice of cancellation may result in the session being charged in line with NDIS cancellation rules.

7. Changes and Reviews

This agreement may be reviewed and updated at any time with consent of both parties. Either party may end this agreement with 14 days' written notice.

8. Feedback, Complaints and Disputes

- Feedback or complaints can be directed to the provider.
- If unresolved, participants can contact the NDIS Quality and Safeguards Commission on 1800 035 544.

9. Privacy and Confidentiality

All personal information will be kept private and only shared with consent or as required by law.

10. Signatures

Participant/Representative Name:	_____
Signature:	_____
Date:	_____

Provider Name: _____

Signature: _____

Date: _____

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■ NDIA (Agency-managed)

■ Plan-managed – Plan Manager Name:

■ Self-managed – Bank Details:

Schedule of Supports

Support Item	Description	Frequency	Unit Price	Total Budget
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signatures

Participant/Representative Name:

Signature:

Date:

Provider Name:

Signature:

Date: