



TEMPLATE · 2026 EDITION · A4 PDF

NDIS Service Agreement

A plain-English one-pager between an independent support worker and an NDIS participant. Covers supports, rates, cancellations, and how things end.

1. The parties

SUPPORT WORKER	PARTICIPANT
Trading name	Full name
ABN	NDIS number
Email · Phone	Plan dates (start – end)
Insurance & screening on file	Plan management

2. Supports we agreed on

Support item code	Description	Hours / wk	Rate \$/hr

3. Travel

Labour time and km are claimed under the participant's plan in line with the current NDIS Pricing Arrangements. We agreed: _____.



4. Cancellations and no-shows

If the participant cancels with less than ___ business days notice, or does not show, the support worker may claim 100% of the agreed support price for that shift, in line with the NDIS Pricing Arrangements. This is capped at the limits the NDIA sets each year.

5. Changes to the agreement

Either party can ask to change this agreement at any time. Changes are only valid when both parties have agreed in writing (email is fine). New rates only apply to shifts on or after the date both parties agree.

6. Ending the agreement

Either party can end this agreement by giving ___ days notice in writing. The support worker can end it immediately if it is no longer safe to provide supports.

7. Privacy and records

The support worker keeps records of shifts, progress notes, and invoices for at least 7 years, as required by the NDIS Commission and the ATO. The participant can request a copy at any time.

8. Feedback and complaints

If something goes wrong, please raise it with the support worker first. If it cannot be resolved, the participant can contact the NDIS Quality and Safeguards Commission on 1800 035 544.



9. Signatures

Both parties agree to the terms above. Sign and date below. Keep a copy each.

SUPPORT WORKER

Name: _____

Signature: _____

Date: ____ / ____ / _____

PARTICIPANT OR NOMINEE

Name: _____

Signature: _____

Date: ____ / ____ / _____