

**Referral Form**

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| Pupil Name: | D.o.B |
| Year Group: | UPN: |
| Home Address:  Email: | School name/ Contact/ Email / Telephone Number:  Contact: |
| Telephone: | Parent/ Guardian Name: |
| Religion: | Nationality: |
| Language: | City of Birth: |
| PP: Y / N | FSM: Y / N |

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| **Attendance over last 3 terms:** | | |
| Autumn: | Spring: | Summer: |

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| **Supporting Evidence** | | | |
| CAMH’s | GP | Consultant | Other : |

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| **Interventions used:** |

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| **SEN Status (Current needs as logged on SIMS)** |

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| **Has the pupil been previously known to Inclusion Support? YES NO** |
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| **Are there other agencies involved with the pupil? YES NO** |
| If yes – please give details |

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| **Safeguarding Status** | | | |
| CiN | CP | TAF | LAC |

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| **Reason for Referral** |

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| **SEMH Evidence** (You may wish to mention Social and Emotional development, relationships with peers or adults, describe behaviours seen, describe the parental or carer’s role in supporting the child or young person) |

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| **Documents included in the referral** | | | |
| EHCP (if applicable) | Latest School Report | Latest Behaviour Report | Supporting Medical Evidence |

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| **In order for the referral form to be processed the following must be adhered to**   * Referral form completed with the required information * All supporting evidence – school report / behaviour record / medical evidence must be attached |

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**Once the form is complete please upload to Moveit using this web address marked FAO S Long** [**https://secure-mft.sandwell.gov.uk**](https://secure-mft.sandwell.gov.uk)

**Our DfE number is T333/1100**

**The New GDPR Regulations:** The school is registered under the General Data Protection Regulations (GDPR – 25/05/2018) for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority and with the DfE.