

School/Local Authority Referring	Date of Referral:
Name of Child or Young Person	School Year
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Linked-Learning Ltd is an interim provider of education up to 15 hours in total per week. The School, Academy or Local Authority are wholly responsible for the full-time education package of the student named on the referral.

Tell us about the child/young person including their likes, dislikes, favourite subjects, people, food and places they like:

Which service provision is required?

Please highlight the requested education service.

You may highlight more than one provision if a hybrid approach is required, or you are not sure at this stage.

In Centre Provision	Online learning ***	Tuition in Home or Residential placement	Tuition in school
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Please give a brief overview of subjects required and days/hours per week (Please note the maximum we can provide in one week is 12 hours)

***For Online learning does the child or young person have access to either a desktop or laptop computer connected to Wi-Fi, please highlight: YES/NO

Please note, for safeguarding reasons, Desktop computers would need to be in a social space such as a lounge or kitchen area not a bedroom. If the child or young person does not have home access to a computer, is the school prepared to loan a computer for the duration of the tuition please highlight: **YES/NO**

It is a requirement that there must be a suitable adult in the home during home tuition sessions and supervision in the home for online teaching sessions.

Home tuition request will require a risk assessment prior to agreement of provision.

SCHOOL DETAILS in full		
Name of School/Academy/Virtual	Address & Postcode	
School/LA		
Name of Referrer	Position of Referrer	
Contact Number (include Ext)	Contact email:	
Is the referrer the budget holder?	YES/NO	
is the referrer the budget holder.	TES/ NO	
YOUNG PERSON INFORMATION (in full)		
TOONGT ERSON INTOKNITTION (III turi)		
Legal Surname	Legal Forename/s	
Preferred Surname	Preferred Forename	
Date of Birth		
Address & Post code		
D.1 : 5	W D II :	
Ethnicity	Known Religion	
Gender/ Identifies as: Male		
Female		
Gay		
Bisexual		
Transgender		
Fluid Gender		
Other		
Unique Dunil Number		
Unique Pupil Number		
Parent or carers details (in full)		
Parent/Carer Name	Relationship to young person	
Contact 1 : Primary person contact details	Address: (if different from above)	

Mobile:	
Landline:	
Email:	
Parent/Carer (must be included if there is a joint parental responsibility)	Relationship to young person
Contact 2:	Address (if different to above):
Mobile:	
Landline:	
Email:	
Emergency Contact details:	Relationship to young person
Telephone number:	Address:

Safeguarding	
Provide details of any sa	feguarding issues when interacting with the young person's
Parents/Carers at schoo	l or at their home:
	L F A R N I N G I T D
Is the child/young	YES/NO
person known to social	
care at the time of	If YES, please give details
referral?	
Has the child or young	YES/NO
person been in care?	
Doog the system a margan	
Does the young person currently have LAC	
status or Relevant	
Child Status?	
Has there been any	YES/NO
child protection	1110/1110
concerns for this	
young person?	
Is the young person a	YES/NO
young carer?	

Is the young person a	YES/NO
young parent?	
-	s the young person has attended (including managed moves)
Include the dates they	attended.
Name of School	Dates attended
attended	
<u> </u>	
Medical Issues and alle	
Does the young person	YES/NO
have any medical	If yes provide details, including any medication they are on/will need
conditions that will	to take during education hours:
impact on their	
education with Linked-	
Learning Ltd teachers	
and staff?	
Does the young person	YES/NO
wear spectacles or use	
hearing aids?	
Does the young person	YES/NO
have any allergies?	
	Please provide details of allergies and medication provided e.g.,
	antihistamine /EPI Pen* or Inhaler*

ATTENDANCE					
Attendance in the current academic year (%)	Attendance in the previous academic year (%)	Part-time timetable (please state hours)	Off-Si	idance on ite sion (%)	Have attendance proceedings ever been instigated?
EXCLUSIONS	1				
Dates of exclusion	1	Number of days excluded		Detailed rea	ason why excluded

^{*} Please not all allergies must be recorded. If a young person is to attend the Centre and requires or may require allergy medication during the time in Centre, this must be provided to the Centre in advance and remain in the Centre at each time the child or young person attends the Centre.

Does the young person attract	Pupil Premium Funding? YES/NO If yes complete the following
Detail the use of Pupil	
Premium funding to date	
Detail the outcomes/impact of	
these interventions	
Does the young person have	Will the young person require a luncheon to be provided for
Free School Meals? YES/NO	them as part of their provision at Linked-Learning Ltd YES/NO
Does the young person have	Details including allergies mentioned above
any allergies or specific	
dietary requirements? ECHP/SEN Action	YES/NO
ECHP/SEN ACTION	TES/NO
Does the young person	If YES, please give:
currently have a statement of	ii i iio, picase give.
SEN or EHC Plan?	The date the EHCP was agreed:
	Next review date:
	Category of need:
	Funding band:
Has the child or young person	YES/NO
been put forwards for	TES/NO
Statutory Assessment?	
Statutory rissessiment.	: A K N I N G LID
Is the school in the process of	YES/NO
collating information to begin	, and the second
the process?	
Has the young person been	YES/NO
seen by an Educational	
Psychologist?	

Additional Profession	al Services /Suppo	ort (involved with the child or	young person)
Agency	Contact name	Telephone/E-mail address	Comments
Educational			
Psychologist			
Social Services			
Youth Offending Team			
CAMHS			
Speech and language			
therapist			
GP/Specialist Doctor			

Drugs or alcohol supporting agencies		
Other		

KEY STAGE 1& 2	T		T
End of Key Stage 1	Numeracy	Literacy	Reading
attainment – Teacher			
assessment			
End of Key Stage 2	English	Maths	Science
predicted Levels			
End of Key Stage 2			
Test Outcome			
Additional information			
Reading age		Date assessed	
Comprehension age		Date assessed	
Spelling age		Date assessed	
Exam concessions	Please state:		
Given for statutory			
tests.(SATS)			
Key Stage 3	English	Maths	Science
Most recent		1 1 1 1 1 1 1 1 1	H LID
assessment			
Predicted Level End of			
KS4			
Vov Chaga A	English	Matha	Caianas
Key Stage 4 Most recent	English	Maths	Science
assessment level			
/teacher assessment			
Date of assessment			
Dute of assessment			
	1		
Predicted level of			
	Awarding	Current working	Predicted working
attainment at GCSE	Awarding Body/Exam Board	Current working level/grade	Predicted working level/grade
attainment at GCSE Other qualifications	•	0	
attainment at GCSE Other qualifications	•	0	
attainment at GCSE Other qualifications	•	0	

Reading age		Date assessed	
Comprehension age		Date assessed	
Spelling age		Date assessed	
Any other Standardised test score/scores	Please give name of Te test/s were administe	est and standardised score	s plus date that the

Exam concessions agreed or required – give details including date of testing:

Please note standarised testing is valid for 26 months from the date of assessment.

Any additional information you think we should know:



Risk Assessment

BEHAVIOUR (Please mark an 'X' in the boxes applicable.								
Is there a risk of:	None	one Low Me		Med	Medium High		gh	Provide detailed examples of the young
		1	2	3	4	5	6	person's behaviour including frequency
Harm or physical								
aggression								
towards other								
young people								
Threats towards								
other young								
people (including								
cyber bullying)								
Threats towards								
members of staff								
Harm or physical								
aggression								
towards staff								
Harm or physical								

aggressions towards members of the public						
Name calling or verbal abuse						
Racist abuse						
Refusal to follow instructions						
Vandalism						

VULNERABILITIES					
Is there a risk of:	None	Low	Medium	High	Provide a detailed explanation of the young person's vulnerabilities
Absconding					V I N G LTD
Being bullied including cyber bullying					
Domestic Violence					
Radicalisation					
Risk taking behaviour					
Self-harm					
Sexual exploitation					
Substance misuse					_

Other			

HEADTEACHER / PRINCIPAL /LOCAL AUTHORITY CONSENT								
I agree that this referral may be made, and that all the information required has been provided and is up to date and accurate								
NAME								
POSITION/JOB TITLE								
SIGNATURE								
Date								
Governing bodies of maintained schools have the power to direct a pupil off-site for education to improve his or her behaviour. Section 29A of the Education Act 2002, introduced by the Education and Skills Act 2008 must be adhered to.								

Office Use Only				
Date Received		_		ITO

What happens next?

Following the submission of this form to Linked-Learning Ltd, We will assess the information and contact the named referrer on the form to discuss whether we can meet the needs of the child or young person. If it is agreed that we can meet need and the budget holder has agreed a budget, the next step is to invite the child/young person into the centre for a meet & greet.

For online learning packages, our team will contact the named parent/carer and discuss how we work, our online learning policy and the sessions we can provide.

For outreach, we will need to complete a home check/safeguarding risk assessment to ensure that the property is a safe environment in which to teach and conducive to learning. We produce a risk assessment and there is a $\pounds 60.00$ charge for this service regardless of whether the provision is commissioned following this assessment.

For further information or an informal chat prior to completion of this form, please contact Brett Stevenson on 07847 252340