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| Referral Form for **Online or In-School** Tuition |

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| **Date of Referral** | | | | | |
| **Name of School or Academy** | | | | | |
| **Address & Contact number/email for School** | | | | | |
| Name of Referrer |  | | Position of Referrer | |  |
| Contact Number |  | | Contact email address | |  |
| Name of School or Academy Designated Safeguarding Lead |  | | How to contact DSL in school | | Deputy  safeguarding Lead |
| **Young Person’s Information** | | | | | |
| Young Person’s full name: | |  | | School Year | |
| Information we may need to know such as preference for **name** or preferred **gender** identification. | |  | | Name of key worker/Head of Year in school if applicable: | |
| **Parent/s or Carer/s’ Contact** | | | | | |
| Full Names | Address  Email contact:  Home Phone:  Mobile numbers: | | | | |
| Technical Availability in the home? (please state how we will connect with the young person) | Laptop | | Tablet | | Other |

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| **Provide a brief overview of teaching support required in terms of subject and hours per week:** |
| \*Please note: as is stated on our Service Level Agreement and Appendix 1, Connect2Education is an Alternative Provider of Education Services and therefore can only be considered as part of a full time education package for each student referred. The School, Academy or Local Authority are wholly responsible for the full-time education package of the student named on the referral. |
| **Please indicate where the on-line (Zoom) tuition is to take place: in school or at home?**  **Where will in-school, 1:1 tuition take place?** |
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| **SAFEGUARDING** |
| Provide details of any safeguarding issues when interacting with the young person’s Parents/Carers at school or at their home: |
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| **MEDICAL ISSUES** | |
| Does the young person have any medical conditions that will impact on their time education with Connect2Education Teachers? | If **yes** provide details, including any medication they are on/will need to take during education hours: |
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| **ECHP/SEN Action /CIN/LAC Please advise:** | |
| Does the young person currently have a statement of SEN/EHCP/CIN Plan? | **Please state specific need:** |
| Has the young person been in foster care or is currently in foster care? |  |

**Attainment.** Please provide levels of attainment; present or last known. For Primary children please indicate working level or most recent assessment level.

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| **YOUNG PEOPLE IN KEY STAGE 1 & 2** | | | |
| **Subject** | | **Current working level** | **Expected level for their age.** |
| Reading | |  |  |
| Writing | |  |  |
| Number | |  |  |
| Phonics | |  |  |
| **OTHER ASSESSMENT DATA** | | | |
| Reading age |  | | |
| Comprehension age |  | | |
| Spelling age |  | | |
| Any other, relevant, assessment data |  | | |

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| **YOUNG PEOPLE IN KEY STAGE 3** | | |
| **Subject** | **Current Key Stage 3 Level** | **End of Key Stage 4 prediction** |
| English |  |  |
| Mathematics |  |  |
| Science |  |  |

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| **YOUNG PEOPLE IN KEY STAGE 4** | | |
| **Subjects** | **Current level** | **Target level** |
| English |  |  |
| Mathematics |  |  |
| Science |  |  |
| **OTHER ASSESSMENT DATA** | | |
| Reading age |  | |
| Comprehension age |  | |
| Spelling age |  | |
| Any other, relevant, assessment data |  | |

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| **BEHAVIOUR (Please mark an ‘X’ in the boxes applicable.** | | | | | | | | |
| Is there a risk of? | None | Low | | Medium | | High | | Provide detailed examples of the young person’s behaviour including frequency |
|  | 1 | 2 | 3 | 4 | 5 | 6 |
| 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 |  |  |  |  |  |  |  |  |

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| **VULNERABILITIES (Please mark an ‘X’ in the boxes applicable.** | | | | | | | | |
| Is there a risk of? | None | Low | | Medium | | High | | Provide detailed examples of the young person’s vulnerabilities |
|  | 1 | 2 | 3 | 4 | 5 | 6 |
| Absconding |  |  |  |  |  |  |  |  |
| Being bullied including cyber bullying |  |  |  |  |  |  |  |  |
| Domestic Violence |  |  |  |  |  |  |  |  |
| Radicalisation |  |  |  |  |  |  |  |  |
| Risk Taking Behaviour |  |  |  |  |  |  |  |  |
| Self-Harm |  |  |  |  |  |  |  |  |
| Sexual Exploitation |  |  |  |  |  |  |  |  |
| Substance Misuse |  |  |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |  |  |

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| **YOUNG PERSON’S preferences e.g., female teacher/male teacher; strengths, interests.** |
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| **HEADTEACHER / PRINCIPAL/Budget Holder CONSENT** | |
| I agree that this referral may be made, and that all of the information required has been provided and is up to date and accurate | |
| Signed |  |
| Name |  |
| 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. | |

For all Online Learning, Connect2Education will send out a copy of our Digital Learning policy (which includes safeguarding protocols) to parents/carers and seek agreement to that policy prior to lessons.

A copy of our online learning policy is available on our website www.connect2education.co.uk