

**Request to Provision Panel for entry/exit of placement at Oakhill Resourced Provision**

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| **Child’s Name:**  | **Date of Birth:**  |
| **Educational Setting:** | **NC Year:**  |
| **Medical Diagnosis (if any known):** |
| **Lead Professional (this should be a member of staff at the child’s host school)** |  |
| **Please highlight Child’s current SEN status**  | **SEN Support/EHC Plan \*please highlight/delete as appropriate**  |
| **Persons involved/invited and/or who attended the meeting – this must include representative from the child’s school.**

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| **Name** | **Designation/Role** | **Involved✓** | **Invited✓** | **Attended✓** | **Report received prior to the meeting✓** |
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| **Evidence from designated setting of interventions through SEN Support including monitoring and evaluation of progress towards outcomes. Attach copy of SEN Support Plans.** |
| **What will the Resourced Provision provide to support achieving desired outcomes?** |
| **Attendance** **Attendance for previous school year = \_\_\_\_\_\_\_\_\_\_\_\_\_%****Attendance this school year = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%****Please give details of significant periods/patterns of absence including EWO report for less than 85%.** |
| **Progress data:**Please share school progress data. This **must** include at least 2 assessment points. |
| **Child’s Views:** |
| **Parent/Carers Views:** |
| **Transition Plan (how will the professionals involved manage the transition of the child through the change in setting).** |
| **Checklist – have you included All reports from included professionals – Y/N**  **(if there are reasons why not include this in the summary of the meeting** |
|  | **Signed:** |
|  | **Designation (must be from designated school):** |