

Education Safeguarding Prosecution/Penalty Notice Referral Form

Please be aware information will be treated as sensitive but may be shared with the parents/carers.

Pupil Information:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Pupil name: | hdihd | | | School: |  | | |
| AKA: |  | | | Gender: |  | | |
|  |  |  |  |  |  | | |
| DOB: |  | Year Group: |  | Ethnic Origin: |  | | |
|  | | | | | | | |
| Address: |  | | | | | Postcode: |  |

Parent/Carer Contacts:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Landline/mobile/email address: |  |
| Name: |  | Landline/mobile/email address: |  |

Family Members (parents/carers, siblings and other significant people in the household)

|  |  |  |
| --- | --- | --- |
| Name | Relationship | School/Address if different |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Agencies Involved:

|  |  |  |
| --- | --- | --- |
| Agency | Worker Name | Contact number |
|  |  |  |
|  |  |  |
|  |  |  |

**Required information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Is there SEN Support? | Yes current | Yes in past | No | Not known |
| Is there an ECHP? | Yes current | Yes in past | No | Not known |
| Looked after child? | Yes current | Yes in past | No | Not known |
| Child Protection Plan? | Yes current | Yes in past | No | Not known |
| *Child in Need* | Yes current | Yes in past | No | Not known |
| *Early Help* | Yes current | Yes in past | No | Not known |
| Are there any Safety Issues for staff visiting the home? | Yes | | No | Not known |
|  | | | | |

**Information Sheet**

1. **Action Taken Prior to Referral.**

**Please see checklist**

1. **Pupil Information**

Does the pupil:

* Have emotional, behaviour difficulties or learning difficulties? **YES / NO**
* Have a specific education plan in place ie IEP, BSP SEN Statement? **YES / NO**
* Have problems relating to others – teachers, peer group? **YES / NO**
* Have any mental health issues (including school anxiety)?  **YES / NO**
* Have physical health issues?  **YES / NO**
* Present any anti-social behaviour (drug taking/offending) or place themselves at risk?  **YES / NO**
* Has the pupil alleged or been subject to bullying? **YES / NO**
* Does the pupil have an entitlement to Pupil Premium? **YES / NO**

**Any other relevant information:**

**\*\* It is expected that parents/carers are informed by school of this referral**

**Referrer Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **School/Agency:** |  | | | | |
| **Referred by:** |  | **From:** |  | | |
| **Signed:** |  | **Date:** |  | **Tel:** |  |