**Primary Personal Education Plan**

**Review of Previous PEP Targets**

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| **Short Term Targets** |
| **Previous PEP Targets** | **Impact of the actions** | **Has the success criteria been achieved Y/N** | **If the success criteria has not been met, what needs to happen next?** |
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| **Medium Term Targets** |
| **Previous PEP Targets** | **Impact of the actions** | **Has the success criteria been achieved Y/N** | **If the success criteria has not been met, what needs to happen next?** |
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| **Long Term Targets** |
| **Is the child/young person on track to meet the long term targets?** |  |
| **If not, what actions are you putting in place to help achieve these targets** |  |
| **Is the child/young person on track to reach their end of year targets** |  |

**EXPECTED PROGRESS – Must be completed**

**Please state whether the child is making expected progress or more than expected progress in the following areas:**

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| **READING** |
| In comparison to Age Related Expectations | Yes/No |
| In comparison to prior attainment | Yes/No |
| **WRITING** |
| In comparison to Age Related Expectations | Yes/No |
| In comparison to prior attainment | Yes/No |
| **MATHEMATICS** |
| In comparison to Age Related Expectations | Yes/No |
| In comparison to prior attainment | Yes/No |
| **If the answer is NO to any of the above questions please record what support will be put in place in new targets to close the gap** |

**New Targets**

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| **Short Term Targets (to half term)** |
| **Target (SMART)** | **Action – what will you do? Who will do it? When will they do it?** | **Success criteria - what will you see?** | **Pupil Premium/****Bursary (cost linked to target** |
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| **Medium Term Targets (to next review)** |
| **Target (SMART)** | **Action – what will you do? Who will do it? When will they do it?** | **Success criteria - what will you see?** | **Pupil Premium/****Bursary (cost linked to target** |
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| **Long Term Targets (to the end of the school year)** |
| **Target (SMART)** | **Action – what will you do? Who will do it? When will they do it?** | **Success criteria - what will you see?** | **Pupil Premium/****Bursary (cost linked to target** |
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| **Extended/out of school targets** |
| **Target (SMART)** | **Action – what will you do? Who will do it? When will they do it?** | **Success criteria - what will you see?** |
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| **General Behaviour** |
| **Issues** | **Action – what will you do?**  | **Who will do it?**  | **When will they do it?** |
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| **Special Educational Needs and Disability** |
| **Does the child have a Special Educational Need and Disability? (Yes or No)** |  |
| **Which SEND Code of Practice stage is the child at?** |  |
| **If not at a Bradford school, is the child on SEND Support or EHCP?** |  |
| **What is the child’s Primary Special Educational Need and Disability?** |  |

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| **Any Comments** |
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| **Transition Plans - where appropriate** |
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| **Child’s views** |
| **Well Being -**  |  |
| **Achievement -** |  |
| **Attendance -** |  |
| **Support -** |  |
| **Relationships -** |  |

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| **Planning** |
| **Plan Revision** |  |
| **Plan effective from** |  |
| **Date of Next PEP** |  |