

STUDENT REFERRAL FORM

|  |
| --- |
| **Student information** |
| Name of Student: |  |
| Preferred Name: |  |
| Gender: |  |
| Date of Birth: |  |

|  |  |
| --- | --- |
| Year Group: |  |
| Current School: |  |
| Pupil Premium: | Yes |  | No |  |
| Free School Meals: | Yes |  | No |  |
| School Contact: |  |

|  |
| --- |
| **Contact details** |
| Home Address: |  |
| Parent / Carer Name: |  |
| Relationship to Child / Young Person: |  |
| Contact Number: | Home: | Mobile: |
| Email Address: |  |  |
| Name of Person with Parental Responsibility:(if different from above) |  |
| Details of the placement shared with Parents / Carer? | Date: By Whom:  |
| Is the child looked after by the local authority?(if yes, which authority) | Authority: |
| Does the child have an EHCP?(If yes, this MUST be attached) |  |

|  |
| --- |
| **Agencies Involved** |
| Name of Agency: | Nature of Involvement: | Key Professional: |
|  |  |  |
|  |  |  |

|  |
| --- |
| **Reasons for referral** |
| Brief overview of the reasons for referral to Invested Education and ***planned outcome of the placement*** (e.g. reintegration into mainstream, full-time enrollment in alternative provision, instigation of EHCP process) |  |
| Expected duration of placement |  |
| Requested days |  |
| **Previous strategies** employed by referring school and indication of the level of success. |  |
| Strengths - positive attributes, interests and preferred learning style. |  |
| What are the schools' targets for the student at Invested Education?  |  |
| What qualifications do the school want their student to work towards? |  |

|  |
| --- |
| **Specific needs** |
| Does the student have any **SEND**? Please give details.*If the student has an EHCP this MUST be attached.* |  |
| Does the student have any **Medical / Health Needs**Please give details.*If the student has an Individual Health Plan this MUST be attached.* |  |
| Does the child take regular prescribed medication? Please give details |  |
| Please give details of any **dietary requirements** (Vegan, vegetarian, Halal, Kosher etc.) |  |
| Food (or other) allergies or intolerances |  |
| **Travel arrangements**(Please give details of how the student will arrive and depart Invested Education ie, walk, bus, taxi, dropped off) |  |
| Any further information |  |

|  |
| --- |
| **Attendance** |
| Year | Percentage attendance | Authorised Absence: | Unauthorised Absence: |
| 7 |  |  |  |
| 8 |  |  |  |
| 9 |  |  |  |
| 10 |  |  |  |
| 11 |  |  |  |

|  |
| --- |
| **Attainment** |
| Key Stage 2 results (All students) | Maths | English |
|  |  |
| **Key stage 3 student** |
| **Subject:** | **Target level** | **Current** | **Predicted**  |
| English |  |  |  |
| Maths |  |  |  |
| Science |  |  |  |
| Art and Design |  |  |  |
| Computing, Design & Technology  |  |  |  |
| Languages |  |  |  |
| Geography |  |  |  |
| History |  |  |  |
| Music |  |  |  |
| Physical Education |  |  |  |
| Religious Studies |  |  |  |
| **Key stage 4 student** |
| Key Stage 4 Subjects: | Qualification (GCSE, BTEC) | Awarding Body | Target Grade | Current Grade | Predicted Grade |
| English Language |  |  |  |  |  |
| English Literature  |  |  |  |  |  |
| Maths |  |  |  |  |  |
| Science |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

|  |
| --- |
| **Risk Assessment** |
| Date of assessment |  |
| Staff carrying out assessment |  |

|  |
| --- |
| **PHYSICAL AND VERBAL ABUSE** |
|  | Yes | No | COMMENTS |
| Violent behaviour towards female staff |  |  |  |
| Violent behaviour towards male staff  |  |  |  |
| Violent behaviour towards female peers |  |  |  |
|  Violent behaviour towards male peers |  |  |  |
|  Verbal aggression towards female staff |  |  |  |
| Verbal aggression towards male staff |  |  |  |
| Verbal aggression towards female peers  |  |  |  |
| Verbal aggression towards male peers |  |  |  |
| Impulsive/ dangerous behaviour |  |  |  |
|  Made allegations of physical abuse by staff |  |  |  |

|  |
| --- |
| **SUBSTANCE ABUSE** |
|  | Yes | No | COMMENTS |
| Have they taken illegal drugs? |  |  |  |
| Have they been involved in dealing drugs? |  |  |  |

|  |
| --- |
| **SEXUAL BEHAVIOUR** |
|  | Yes | No | COMMENTS |
| Inappropriate sexual behaviour towards female staff |  |  |  |
| Inappropriate sexual behaviour towards male staff |  |  |  |
| Inappropriate sexual behaviour towards female peers |  |  |  |
|  Inappropriate sexual behaviour towards male peers |  |  |  |
| Made allegations of inappropriate sexual contact |  |  |  |

|  |
| --- |
| **OTHER AREAS OF CONCERN** |
|  | Yes | No | COMMENTS |
| Self-harm |  |  |  |
| Known to carry dangerous articles |  |  |  |
| Been involved in racial issues |  |  |  |
| Leaves premises without permission |  |  |  |
| Been involved in bullying |  |  |  |
| Has been bullied |  |  |  |
| Has been involved in vandalism of property |  |  |  |
| Any involvement in arson |  |  |  |

|  |
| --- |
| **HOME ENVIRONMENT** |
|  | Yes | No | COMMENTS |
| Parent/carer/family member has been verbally aggressive |  |  |  |
| Parent/carer/family member has been physically aggressive |  |  |  |
| Parent/carer/family member has been known to make allegations of misconduct |  |  |   |
| Parent/carer/family member known to misinterpret comments |  |  |  |

|  |
| --- |
| **MANAGEMENT & SUPERVISION OF PUPIL** |
| Details: |

|  |
| --- |
| **TRIGGERS/FLASHPOINTS** |
|  | Yes | No | COMMENTS |
| Peer provocation |  |  |  |
| Work/task frustration |  |  |  |
| Poor academic ability |  |  |  |
| Noise levels |  |  |  |
| Teacher responses |  |  |  |
| Social time incidents |  |  |  |
| Lunch time incidents |  |  |  |
| External factors |  |  |  |
| Medication (ADHD) |  |  |  |
| Formal lessons |  |  |  |
| Free activities |  |  |  |
| Exposing of self esteem |  |  |  |
| Not getting own way |  |  |  |
| Inability to comprehend instructions |  |  |  |
| Task frustration due to motor or sensory difficulties |  |  |  |
| Stigma-rejects or dislikes support |  |  |  |
| Social relationships |  |  |  |
| Inability to cope with physical demands of the day |  |  |  |
| Erratic learning pattern, loss of concentration |  |  |  |
| Adverse reaction to authority |  |  |  |
| Moving around class |  |  |  |
| Moving around school |  |  |  |
| Unfamiliar adults (supply, visitors, etc) |  |  |  |
| Name calling |  |  |  |
| Being bullied |  |  |  |
| Manipulated |  |  |  |
| Being ignored |  |  |  |
| Peer rejection |  |  |  |
| Student catalysts (provoking behaviour) |  |  |  |
| Late for lessons (misses instructions) |  |  |  |
| Poor attendance (missed learning) |  |  |  |
| Reprimands |  |  |  |
| Just wants to be left alone |  |  |  |

|  |
| --- |
| **RISK LEVEL- please indicate the level of risk you think is appropriate for the student** |
| Rating | DESCRIPTION |  |
|  1 (Low) | Normal range of behaviour given age |   |
|  2 | Occasional incidents of non- compliance/ challenge associated with mood swings  |   |
|  3 | Regular incidents of non-compliance/ challenge including aggressive confrontations with other |   |
|  4 | Commonplace incidents of non-compliance/ challenge including dangerous behaviour associated with impulsiveness, a lack of anticipation and acceptance of consequences and ignoring adult advice |   |
|  5 | Numerous incidents of non-compliance and severe challenge including violence and aggression associated with loss of emotional control, and the undermining of adult authority |   |
|  6 (High) | Numerous incidents of non-compliance and severe challenge including dangerous, violent and aggressive behaviour, bullying and assault associated with premeditation, and undermining adult authority to the detriment of others |   |

|  |
| --- |
| **OVERALL SUMMARY AND RISK LEVEL:**  |

***Please attach any appropriate supporting documentation:***

***e.g. Student passport, SIMS pages, assessment data, EHCP, Health Care plan***



**Student placement agreement**

I give my consent for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to attend Invested Education.

I am aware that my child will follow a programme which may differ from the curriculum available at (Name of School) and agree that it would best meet his / her needs at the current time. I understand however, that my child will remain on the roll of (Name of School) and they continue to have responsibility for ensuring he/she has access to the appropriate full time educational provision.

I understand that Invested Education staff will supervise my child whilst attending the provision and appropriate (Name of School) staff will continually monitor my child’s progress.

I acknowledge my responsibility for my child’s behaviour and attendance during his / her time at Invested Education and will work with the school and Invested Education to ensure any issues raised are resolved swiftly.

**Sharing of Information**

I understand that information about my child may be shared with Invested Education. This information will remain confidential and only shared between appropriate staff for the purposes of ensuring identified needs are met and/or in the interest of ensuring my child, other children and adults are appropriately safeguarded.

Signed (parent/ carer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_

Signed (School) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_