**Additional education information form**

Childs name …………………………………………..

This form is designed to be used alongside the Hub referral form

|  |  |
| --- | --- |
| **Education specific information** | **Please answer as fully as possible** |
| Is the CYP currently on your SEN Register? | **Y/N** |
| If Y, at what level?  Initial Concerns/Passport/Profile/ SEN Support Plan in place |  |
| If N, what support is in place  Pastoral support, counselling etc, nurture groups etc? |  |
| In your support of this child or young person, are there any identified targets around social emotional and mental health? | **Y/N** |
| If Y, what is the target and what actions have you been taking to work towards the target, when did this happen? |  |
| Have you had any external advice to support you with planning your interventions? | **Y/N** |
| If so, please specify from whom and when? eg Educational Psychologist, SEND Support Services, other agencies |  |

Please send this form alongside the main Hub referral.