



Pupil Referral Form – Traded Services – Pupil Provision

Please send completed referral forms (along with supporting documentation) as an encrypted email to:
referrals@raedwaldtrust.org

Incomplete referrals will not be accepted and will be returned to the sender.

Parent/carer/social worker signatures must be obtained prior to submitting the referral to Raedwald Trust.

Raedwald Trust Traded Services – Provision required:

For further details on traded service pupil provision and curriculum:

<https://www.raedwaldtrust.com/traded-services/traded-services-curriculum/>

Provision:	Yes/No – delete as necessary	Number of sessions per week (1 session = 2.5hrs – max of 15 hrs per week) for a minimum of <u>one</u> term:
1:1 - Package 1	Yes/No – delete as necessary	
1:1 - Package 2	Yes/No – delete as necessary	
KS4 Resilience Group – Package 3	Yes/No – delete as necessary	3 days a week @ 15 hrs (fixed) - NOT CURRENTLY AVAILABLE IN ESSEX

Suffolk / Essex Virtual School Referrals:

Is this a pre-funded Suffolk Virtual School / Essex Virtual School referral?	Yes/No – delete as necessary
If yes, name of SVS / EVS lead:	Name: Email: County: Suffolk / Essex – delete as necessary

PART 1: PUPIL DETAILS, EDUCATION BACKGROUND & ASSESSMENT DATA:

Pupil details:			
Surname		Forename(s)	
Date of birth	Year Group	UPN	
Gender			
School			

Address (where currently living)			
Postcode		Home tel no.	
Home language 1		Nationality	

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Home language 2		Ethnicity	
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Reason for Referral – referrer to give brief outline of reasons for referral and what the desired outcome is should support be offered:

Current school provision outline – E.g., is the pupil in school full time? If not, what is the part time timetable and its rationale? Is the pupil taught in class with peers or separately? Is 1:1 in place and if so, for what proportion of the timetable? Is the pupil currently accessing any third part provision as part of their offer? If so, why?

SEND stage:

SEND Support	N / K or E
Education Health Care (EHC) Needs Assessment requested	
Education Health Care (EHC) Needs Assessment started	
Education, Health and Care (EHC) Plan	

Additional information:

Free School Meals		Pupil Premium	
High Needs Funding		High Needs Funding Band	
Current attendance			

Profile of need:

Areas of need (tick only one primary need)	Primary	Additional
Communication and interaction (including SLCN)		
Cognition and learning (including SpLD)		
Social, emotional and mental health		
Sensory / Physical (<i>with clinically diagnosed sensory loss and not sensory processing or integration difficulties</i>)		

Assessment Data:

Key Stages 1 and 2:

Current progress in Reading, Writing and Maths (<i>KS1 or KS2</i>) (<i>please comment on progress over time</i>)	Reading:	Writing:	Maths:	
Current attainment / performance in Reading, Writing and Maths (<i>KS1 (where appropriate, or Key stage 2)</i>)	Reading: (<i>including standardised score/reading age/ date of assessment/test used</i>):	Writing: (<i>including spelling standardised score/date of assessment /test used</i>):	Maths: (<i>including standardised score/maths age/date of assessment/test used</i>):	G.P.S. test scaled score (<i>Key Stage 2</i>):
Target / predicted end of Key Stage 2 assessments	Reading	Writing	Maths	
Year 2 teacher assessment	Reading	Writing	Mathematics	Science
Year 2 phonics re-check if the threshold was not met in year 1	Met the threshold Yes / No	Score out of 40		

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Year 1 phonics screening check	Met the threshold Yes / No	Score out of 40	
Reported outcome at the end of EYFS	GLD Yes / No	Comments/additional information:	

Key Stages 3 and 4:

End of Key Stage 2 outcomes	Reading:	Writing:	Maths:	
Current progress in English and Maths (KS3/4) (please comment on progress over time)				
Current attainment in English and Maths (KS3/4) (please include standardised assessments)				
Target / predicted grades for the end of KS4 OR grades already achieved at KS4	English	Maths	Science	Other subjects

Any further assessments relating to the learner's profile of need (e.g., PhAB 2, CTOPP 2, BPVS 3, WRAT 5)

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Current school's APDR graduated response:

Dates(s)	SEND Area of Need	Plan: What strategy, intervention or approach has been implemented?	Review: Detail the impact achieved and the progress made

Education history:

Previous Schools / Settings / EHE (Elective Home Education)	Dates attended

Suspension Data:

Date of suspension	Length of suspension	Reason	Adjustments made to provision to support reintegration

IMPORTANT:

Is this child <u>known</u> to be at serious risk of violence or Child Criminal Exploitation (CCE)?	Yes/No – delete as necessary
If at risk of CCE, has a referral been made to the MACE Panel? Multi-Agency Criminal Exploitation (MACE) Panel - Referral Form (office.com)	Yes/No – delete as necessary

Child in Care:	
Child in Care	Yes/No – delete as necessary
If a Child in Care, name of Authority	
Child in Care status	
Social worker name	
Social worker email/telephone no	

Social Care:	
Child in Need	Yes/No – delete as necessary
Child Protection 0-18	Yes/No – delete as necessary
Child in Care 0-16	Yes/No – delete as necessary
Leaving Care 16+	Yes/No – delete as necessary
Early Help 0-18	Yes/No – delete as necessary

Other professionals (involved in last 6 months):			
Agency	Key worker name	Contact details	Date of last contact
Psychology and Therapeutic Services (P&TS)			
Specialist Education Services (SES)			
Social Care (Please specify team)			
Suffolk Youth Justice Service			
Health (Please specify)			
Mental Health Services (Please specify)			
Early Help (Please specify team)			

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Other(s) please list below:

PART 2: PUPIL'S, PARENT'S & SCHOOL'S VIEW:

Pupil's & Parent's View:

Pupil's View (What is working well? What are you worried about?)

Parent's/Carer's View (What is working well? What are you worried about?)

School's View:

School's View (What is working well? What are you worried about?)

PART 3: REFERRER DETAILS & PARENT/CARER/ SOCIAL WORKER CONSENT:

Referrer details:

Referral made by:	School / Suffolk Virtual School / Essex Virtual School (delete as necessary)		
Forename(s)		Surname	
Role		Telephone	
School			
Address			
Email			
Signature		Date	
School DSL - name		Email:	
School Attendance - name		Email:	
Invoices to go to – name		Email (school finance dept)	
Purchase Order			

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Number (must be provided)

Please note the financial agreement is between Raedwald Trust and the commissioning school. All invoices will be sent directly to the school, and it is the school's responsibility to ensure prompt payment is made.

Parent/Carer 1:

Surname		Forename(s)	
Title		Relationship to child	
Address (if different from pupil's)		Parental responsibility?	
		Telephone	
		Mobile	
Postcode		Email	
Home language		Interpreter needed?	

Parent/Carer 2:

Surname		Forename(s)	
Title		Relationship to child	
Address (if different from pupil's)		Parental responsibility?	
		Telephone	
		Mobile	
Postcode		Email	
Home language		Interpreter needed?	

Parent/carers/social worker consent:

I/we confirm that I/we have read all the information on this form and give consent for a referral to be made to Raedwald Trust Traded Services. I/we also give consent for the information contained in this form to be shared and discussed with other professionals supporting the child.

Signature (Parent/Carer 1)		Date	
Signature (Parent/Carer 2)		Date	



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Signature (social worker for all Suffolk/Essex Virtual School referrals)		Date	
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THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH THIS FORM:

Medical Evidence (Consultant or Paediatrician letter, if applicable)

Risk Assessment (Raedwald Trust template)

EHCP (if applicable)

PSED – Personal, Emotional and Development Tracker

Attendance Summary

Current timetable inc any reductions or third-party provision

Most recent school report

DATA PROTECTION STATEMENT:

The personal information you provide on this application will be used by Raedwald Trust for the purpose of arranging bespoke packages and will be shared with allocated teachers. Some of this information, such as health details are defined as “sensitive” under UK GDPR and by signing this application form you are consenting to our processing this for the purposes described in our policy.