Appendix 2 - Attendance Panel Referral Form – this form can only be used if the child has over 15% unauthorised absence and who have had an attendance support plan put in place that has not resulted in improved attendance.

School: DOB: Phone No: Name of Pupil: **Contact Numbers:** M/F: Home: **First Name:** Work: Mobile: Surname: Address: **Post Code:** Yr. & Tutor Group: Name of Parent(s)/Carer(s): Others with Parental Responsibility: Ethnicity: Has the child got more than 15% Unauthorised **Parental** Language/Literacy absence? YES/NO Difficulty Is the pupil on an EHC Plan? Is the pupil a Child in YES/NO Care? (LAC) YES/NO Is the pupil eligible for Is pupil on SEN Register? YES/NO **Pupil Premium? YES/NO** If yes, enter Code: IS THIS CHILD SUBJECT TO A PENALTY NOTICE? YES/NO IF YES THE CHILD CAN NOT BE REFERRED TO THE ATTENDANCE PANEL

Other agencies involved: e.g. Early Help, Children's Social Care, Police, CAMHS, YOT, School Health - Any other relevant information

Reasons provided for absence (please attach a current attendance print out)

| Reason for referral – Please attach school support and attendance plan any other relevant information |
|---|
| SIGNED: DATE: |
| PRINT NAME: STATUS: |
| Date received by School Support Services: |