

**Referral for Legal Action for Unauthorised Absence**

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| **Pupil Name:** |  | **School Year:** | Select Year |
| **UPN:** |  |
| **Referring School:** |  |
| **Reason for Referral:**  | Choose an item.If Other, please give the reason: |

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| **Action to be taken against, please tick which applies:**  | Single Parent (Female) [ ]  Single Parent (Male) [ ] Two Adults in the family [ ]  |
| **Open to Social Care** | **YES** [ ]  **NO** [ ]  |
| **SEN**  |  **E**  [ ]  **K** [ ]  **None** [ ]  |

Have ALL the parents included on the certificate of school attendance received a written warning within 12 months that a failure to secure regular attendance may lead to a Penalty Notice or Court summons being issued? YES [ ]  NO [ ]

*If ‘YES’ please submit this warning along with this referral. If you have ticked ‘NO’: please issue a written warning and, if appropriate, resubmit a referral after 10 further unauthorised absences have been accrued.*

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| **FOR UNAUTHORISED HOLIDAY PLEASE COMPLETE THIS SECTION**  |
| **Was an absence request form submitted?** | **YES** [ ]  **NO** [ ] *If YES please supply a copy. A G code can only be used if there is an absence request form.*  | **If yes, Date:** | Select date. |
| **Headteacher did not authorise request** [ ]  |
| **Headteacher partly authorised request** [ ] *please provide details:*  |
| **Parents notified:** | **YES** [ ]  **NO** [ ] *If YES:* Method of communication*Please supply a copy.* | **Date of notification:** | Select date. |
| **Was a warning included with the notification? YES** [ ]  **NO** [ ]  |
| **FOR UNAUTHORISED ABSENCES PLEASE COMPLETE THIS SECTION** |
| *Please detail the chronology of events including, but not limited to:** *When the concerns arose and how parents were notified;*
* *What subsequent actions were taken;*
* *The views of the parents and the child regarding the pattern of absence.*
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| **Has a Supporting Families nomination form been submitted?** www.torbay.gov.uk/children-and-families/services-and-support/supporting-troubled-families/ | **YES** [ ]  **NO** [ ] *If NO please explain why not:* | **Outcome of nomination form:** |
| **Has a Parenting Contract been offered? *Including offering a meeting to discuss this which parents did not attend.***  | **YES** [ ]  **NO** [ ]  | **If YES was it accepted by parents?** | **YES** [ ]  **NO** [ ] *If YES please supply a copy. If parents did not attend a meeting select NO.*  |
| **Has an Early Help Request for Support been submitted to the MASH?**  | **YES** [ ]  **NO** [ ] *If YES please provide details:*  |
| **Does the child have any SEND?**  | **YES** [ ]  **NO** [ ] *If YES please provide details:*  |
| **Is there an EHCP?** | **YES** [ ]  **NO** [ ] *If YES please provide details:*  |
| **Has an Educational Psychologist been involved?** | **YES** [ ]  **NO** [ ] *If YES please provide details:* |
| **Has there been a TAF meeting?** | **YES** [ ]  **NO** [ ] *If YES please provide details of the Lead Professional:*  |
| **Is there an allocated Social Worker** | **YES** [ ]  **NO** [ ] *If YES please provide details of the nature of the involvement:* |

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| **COMPULSORY SECTION FOR ALL REFERRALS** |

Please attach the following supporting documents:

[ ]  Headteacher’s Certificate of School Attendance

[ ]  Registration Certificate (the dates of which must match the cited period on the above certificate)

[ ]  Written warning issued within 12 months of the cited period

And if applicable:

[ ]  Meeting invitations

[ ]  Parenting contract

[ ]  Communication Log

[ ]  Absence Request form and school’s response

[ ]  Any other relevant evidence which supports this referral

**In ALL cases we must consider the appropriateness of an ESO, please complete the following questions:**

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| 1. Are there any specific needs relating to the young person which cannot be addressed through normal casework and/or school action? If no, skip to D. If a holiday only and the answer to this question is no, please skip straight to signature.
 | YES [ ]  NO [ ]  |
| 1. If the answer to (a) is YES – can a plan be put together to address these needs?
 | YES [ ]  NO [ ]  |
| 1. If the answer to (b) is YES – could a plan work without an ESO?
 | YES [ ]  NO [ ]  |
| 1. In relation to school attendance, does the pupil’s behaviour give the impression that he/she is out of the control of their parent(s)?
 | YES [ ]  NO [ ]  |
| 1. Is there clear evidence from the school/setting that the education of the pupil is being seriously adversely affected through absence from school?
 | YES [ ]  NO [ ]  |
| 1. Does the school believe that the parent(s) will work with professionals without the need for an ESO?
 | YES [ ]  NO [ ]  |
| 1. Are the parents of the pupil capable of effecting a change to the pupil’s behaviour, relating to school attendance, without stronger intervention from the local authority?
 | YES [ ]  NO [ ]  |
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| *FORM SUBMITTED BY:* |  |
| *DATE:* |  |
| *PREFERED METHOD OF CONTACT DETAILS:* |  |

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| **HEADTEACHER TO COMPLETE THIS SECTION PLEASE**  |
| **After considering the answers to the above section, please specify which action you would like the local authority to take.** | **Penalty Notice**  [ ]  **Education Supervision Order** [ ] **Penalty notice and Education Supervision Order** [ ]  |

*Due to needing original signatures on the headteacher’s certificate please submit referrals to: Attendance Improvement Service, 2nd Floor Electric House, c/o Town Hall, Torquay, TQ1 3DR*