

**Torbay Elective Home Education Voluntary Registration Form**

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| **Information on the child** |
| **Full Name** |  | **Birth Sex** |  | **DOB** |  |
| **Ethnicity** |  | **Religion** |  |
| **Information on adult responsible for the child’s education** |
| **Name of adults living in the home and their relationship to the child** | **1.** | **2.** | **3.** | **4.** |
| **Does this person have Parental Responsibility?**  | **Yes/No** | **Yes/No** | **Yes/No** | **Yes/No** |
| **Name of any other children living in the home including their date of birth** | **1.** | **2.** | **3.** | **4.** |
| **Names of any others living in the home, please state relationship to the child**  | **1.** | **2.** | **3.** | **4.** |
| **Are you currently serving in UK armed forces and being posted to the area / a crown servant returning from, overseas? If yes, please give details** |  |  |  |  |
| **Address:**  | **This is the main home address of where the child lives and where the education will take place:** |
| **Main parent/guardian/carer’s contact details**  |
| **Tel (Home)** |  | **Mobile**  |  | **Email** |  |
| **Date of EHE commencement** |  | **Previous School** |  | **Current Year Group** |  |

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| **Primary Reasons for Home Educating your child:** |  |
| * Physical health
* Mental health
* Health concerns relating to COVID-19
* Did not get school preference
* Permanent exclusion
* Risk of school exclusion
* Difficulty in accessing a school place
* Philosophical or preferential reasons
 | * Religious reasons
* Lifestyle choice
* Suggestion/pressure from the school
* Dissatisfaction with the school – general
* Dissatisfaction with the school - SEND
* Dissatisfaction with the school – bullying
* Other Reason (please state):
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| **Further information on your child** |
| **Does your child speak English as an additional language? If yes, please also state their first language** | **No****Yes: -**  |
| **Does your child have any special educational needs and disability (SEND)? If yes, please provide further information.**  | **No****Yes: Has additional needs but not recognised formally or recorded by a school****Yes: Has additional needs and formally recognised as a child with SENDs. Has been recorded within school as a child with SEND. However, does not have an Education Health and Care Plan.****Yes: Has an EHCP (Education Health and Care Plan)**  |
| **Does Your Child have any Medical Diagnosis (Such as ASC or ADHD)? If yes, please state details.** | **No****Yes: -**  |
| **Is your child suffering with any emotional, behavioural, or mental health difficulties? If yes, please provide details.** | **No****Yes: -** **Yes: and receiving CAMHS (Child and Adolescent Mental Health Services) support****Yes: but no longer receiving CAMHS support**  |
| **Is your child receiving social care support?**  | **No****Yes: Receiving Early Help/Supporting Families services****Yes, my child is on a Child In Need Plan****Yes, my child is on a Child Protection Plan** |
| **Is your child currently receiving free school meals?** | **No****Yes** |
| **Is your child a Gypsy, Roma, Traveller, refugee or asylum seeker?**  | **No****Yes** |
| **Is your child registered as a young carer?** | **No****Yes** |
| **Any Other Information:** |  |

**Parental Obligation and Responsibility of Electively Home Educating**

I understand by deciding to Electively Home Educate my child that:

* I am fully responsible for providing my child’s education
* I will provide an efficient, full-time education suitable to my child’s age, ability, and aptitude
* I will take on full financial responsibility for my child’s education including IT equipment, study materials, textbooks, exam entry fees, expert tuition fees etc.
* If I wish to employ a tutor, I am responsible for finding a tutor and ensuring their suitability, e.g., DBS check, insurance, quality of teaching etc
* I am responsible for finding an exam centre willing to accept external candidates for the appropriate exam board
* I am aware that at Key Stage 4, it will be difficult to access examinations of a practical nature such as Art, IT, Design and Technology and Science
* If I wish my child to return to school, there is no guarantee that a place will be available at our chosen school and GCSE exam specifications will vary between schools
* If a school place is not available at our catchment school and we require school transport to another school this will not be funded by the Local Authority
* Preferential treatment is not given to a home educated child if subsequently seeking a new school place
* A 14-16 college placement, such as attending the South Devon College EHE course, is not guaranteed and your child must be 14 by 31st August to start during the new academic year
* A 14-16 college provision, such as the South Devon College EHE course, is only part time. I am responsible for my child’s education for the remainder of the week
* My child will not be entitled to Free School Meals or transport if attending a college as part of their EHE provision
* Free School Meals Holiday Vouchers are not available to children who are electively home educated.
* Apprenticeships are not available to a child of compulsory school age
* If my child accesses a work experience placement, they must be at least 14 years old, and I am responsible for ensuring the suitability of the work experience placement including undertaking risk assessments and checking insurances are in place
* I am aware of Child Employment guidelines found at [Apply for a work permit certificate - Torbay Council](https://www.torbay.gov.uk/business/licensing/child-employment/childrens-work-permits/). If appropriate I will apply for a Child Work Permit Certificate.
* Some Learner Services provided in school will no longer be available, such as, input from Special Educational Needs Teams or pastoral support

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| **I confirm that I am aware of all the above responsibilities that I have for my child now I have chosen to Electively Home Educate.** |
| **CHILD’S NAME:** |  |
| **Date of Birth:** |  |
| **Signed by Parent/Carer:** |  |
| **Printed Name of Parent/Carer:** |  |
| **Relationship to Child:** |  |
| **Date of Signed Form:** |  |

**Please return this form to the EHE Team:**

* **By email to** **ehe@torbay.gov.uk**
* **Or, by post to Elective Home Education Team, Business Support, 2nd Floor, Electric 2nd Floor, Electric House, c/o Town Hall, Castle Circus, Torquay TQ1 3DR.**

**If you require any further support regarding this form or enquiries regarding EHE, please do not hesitate to call the Elective Home Education Team on 01803 206473.**