The purpose of sending additional information is for key information to be shared with the child’s next provider.

Please share this information with your EYQO and send a copy via secure email to the child’s school with the Childs Transition Report.

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| **CHILD’S NAME:** |  | **DOB:** |  |

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| **EARLY YEARS PROVIDER** (PVI NURSERY/CHILDMINDER)  | **Named SENDCo** Name & Contact number | **SCHOOL**Name & Contact number | **Early Years Quality Officer**Name & Contact number |
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| **Free Entitlement Funding** **(what is the child’s full entitlement)** | **15hrs** |  | **30hrs** |  |
| **Currently accessing**  | **Hours** |  |
| **Comments** **(if the child is not accessing their full entitlement please explain the reason for this)** |  |

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| **SENDIF (Yes/No)** |  | **Banding (1,2,3 or 4)** |   | **Current Banding** **End Date:** |  |
| **EHCP (Yes/No)** |  |
| **Section 23 (Yes/No)** |  |
| **Evidence of APDR (Yes/No)** |  |

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| **Parents Comments** |  |
| **Early Years Provider Comments** |  |

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| **NAMES AND CONTACTS OF OTHER AGENCIES INVOLVED (eg. TOSS, Ed.Psych, etc.)** |
| Name | Contact Details: email/phone | Role and service/agency |
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| For All children with SEND Support Files in place, the setting should arrange a **4+1 meeting before the child’s transition to school to share relevant information.**  |
| **Date of 4+1 meeting** |  |

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| --- | --- |
| **Date the Documentation has been sent/ given to the School**  |  |
| **How has the documentation been sent: email, post, hand delivered**  |  |
| **Name of the Person in receipt of the Documentation****(If you are hand delivering)**  |  |
| \*If you are not hand delivering information to the school please send all relevant documentation securely  |

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| **If you are unable to send any documentation to the School, please give a reason why…** |

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| **For further support please contact the Early Years Quality Improvement Team at** **eyqit@tameside.gov.uk** |