# **Persistent Absence (PA) Referral Form**

*Including Warning Period request*

**Guidance for referral**

Please work through the following to support your referral. Incomplete forms will be returned.

**SBC Decision Criteria:**

* The school has exhausted all of their own available interventions/strategies prior to a referral to SBC
* The child has missed at least 10% of their possible attendance
* Attendance concerns are NOT solely related to unauthorised holiday absences

**Checklist to support your referral:**

It is essential you provide this information, in the **Supporting Information** section below, as without this information SBC may request further details and thus delay your request:

* Has the school established the reasons behind the absence? Telephone calls/face to face meetings with family should go beyond the day-to-day absence notification process. This could include: Establishing reasons for illness, family circumstances and any issues at school – has the child/young person been given a voice and asked what their challenges are (wheel of life)?
* Have attendance barriers been identified and worked on i.e. illness, language barrier, school anxiety, SEND – school could complete a wheel of life
* Has the school engaged with any other relevant referral / support including in-house staff i.e. Early Help/Family Support, Social Care, School counsellor. Any MARF or other referrals?
* Has an Attendance Action Plan been completed with the family e.g. setting expectations, targets/plans to help, has progress been checked regularly?
* Have home visits been carried out, where deemed relevant?
* Have formal meetings been held, attended by an SLT person and which should include a conversation with the parent about possible next steps (warning periods / penalty fines)?

**Please be aware** if as part of this form you wish to request a Warning Period to be considered then there must be at least: **10 unauthorised sessions** of absence over a **12-week period** which can be any combination of O, U and G codes.

Please complete (***typed*** *not handwritten*) and return in **Microsoft Word format** to [attendance@slough.gov.uk](mailto:attendance@slough.gov.uk) using the following text within the **subject box of the email**.

Form to be titled: **PA - School Name** - **initials of pupil’** – e.g. PA - Slough Secondary - JB

| Referrer | Details |
| --- | --- |
| Name |  |
| Organisation  (Name of school / Service / LA) |  |
| Contact number |  |
| Email address |  |

| Pupil | Details |
| --- | --- |
| Child’s full name |  |
| Gender |  |
| Date of birth |  |
| Ethnicity |  |
| Address (address has been confirmed with parent or pupil) |  |
| Known siblings - Sibling name/s and school name/s they attend |  |
| Current Attendance (please attach a copy of child’s registration certificate): |  |
| Is the pupil known to children’s services? | Yes / No  If yes give details: |
| Does the child have an EHCP? | Yes / No  If yes give details: |
| Is the child eligible for FSM? | Yes / No  If yes give details: |
| Child Looked After (CLA) ? | Yes / No  If yes give details |
| Any other relevant information (SEND, safeguarding concerns, poor attendance, parent non-engagement, communication) | Details: |

| Parent/Carer | Details |
| --- | --- |
| Parent / Carer 1  Full name: |  |
| Telephone number: |  |
| Email address |  |
| Parent / Carer 2  Full name: |  |
| Telephone number |  |
| Email address |  |
| Home address  (if different from pupil) |  |

**Education Status:**

Is the child registered as in full time education at your school? Yes / No (delete as appropriate)

If No, what arrangements are in place i.e. Managed move, Alternative provision, Temporary Reduced Timetable?.

This would be shown as codes B or D on the child’s register.

**Supporting Information** (alternatively please attach any relevant documents providing the information below)

1) School’s understanding of reasons for absence/chronology of contact and responses:

2) Support/Interventions provided:

3) Details of any further school action:

**Warning period request**

Do you wish a warning period (WP) to be considered for the pupil’s family as part of this referral?

**Yes/No**

**Remember you should have already discussed with parents at your meetings that a warning period may be issued if attendance does not improve.**

Date of O, U and G codes in a 12 week period to be considered:

**Declaration:**

I confirm that the details contained on this form are true to the best of my knowledge and belief. I authorise SBC to, where appropriate, instigate legal enforcement action as an outcome of this referral.

**Signature of Headteacher/Designated attendance lead:**

**Date:**