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| Parent/Carer Views |



**This document is intended for parents to provide their views in relation to their child’s special educational needs and their aspirations for their child. This document is supplementary evidence for any young person who is over 16. The young person must complete a form giving their view and consent. The only exception is when the child or young person is deemed not to have mental capacity under the Mental Capacity Act (2007).**

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| **Please tell about your child at home and at school/college/further education (if applicable) --- What do they enjoy, What do they do well at? What do they find difficult?** |

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| **What are hopes for your child in the future?** |

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| **What do you feel is currently helping or working well for your child in school/college/further education?** |

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| **Are there any areas of difficulty that you feel are not fully being addressed in school/college/Further Education or by other services?** |

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| **Does your child have any health or social care needs? Do you have any recent advice or reports you are willing to share to support this request?** |

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| **Are there any other services/professions currently involved?** |

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| **Is there anything else you would like us to know?** |

I/We would like you to consider my child’s special educational needs. I/We give you permission to contact my child’s school, health services, social care or other professionals to obtain information about me/them.

**Parent/carer signature: Date:**

**Parent/carer full name: Date:**

**Please return this form, together with all supporting/additional documents to:**

**Please return this form, together with all supporting/additional documents to:**

**0-25 SEND Service**

**Floor 4, Zone A**

**Bernard Weatherill House**

**8 Mint Walk**

**Croydon CR0 1EA**

**For more help and assistance completing this form please contact:**

**SENDIASS - KIDS**

**Helpline: 020 8663 5630**

**Email:** [**Croydon@kids.org.uk**](mailto:Croydon@kids.org.uk)

**Web:** [**www.kids.org.uk**](http://www.kids.org.uk)

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| Date Received: | Response due by: |
| Officer: | Panel Date: |