

ANNUAL REVIEW REPORT

Section 1A – Pupil Details					
Date of Annual Review:					
Surname:	Names of those with parental responsibility:				
Forename(s):	Head of Household:				
Date of Birth:	Address:				
Gender: Male Female (delete as appropriate)	BFPO No.:				
Address:	Service Number:				
	Rank :				
BFPO No.:	Service Address:				
Primary Need:	School:				
Secondary Need:	Child in Public Care: Yes: No: (delete as appropriate)				
National Curriculum Year	Date of last Annual Review:				
(including offset):	Date of this Annual Review:				
Date of original Statement:	Unique Pupil No:				
Date of amended Statement:	Language spoken at home:				
Ethnic Origin:	Religion:				
Areas of Need: (ASD) – Autism Spectrum Disorder; (BESD) – Behaviour, Emotional & Social Diffs; (HI) – Hearing Impairment; (MLD) – Moderate Learning Diffs; (MSI) – Multi-Sensory Impairment; (PD) – Physical Diffs; (PMLD) – Profound & Multiple Learning Diffs; (SLD) – Severe Learning Diffs; (SLCN) – Speech, Language & Communication Needs; (SpLD) – Specific Learning Diffs; (VI) – Visual Impairment. Please highlight main need. Please identify any pupil details changes in Section 1A since the last review meeting:					

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https://www.gov.uk/government/collections/service-childrens-education. For the statutory guidance on the

special educational needs and disability (SEND) system please visit: https://www.gov.uk/government/publications/send-code-of-practice-0-to-25.

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	Designation/Role	Involved ✓	Invited ✓	Attended ✓	Report received prior to the meeting ✓
ormation required re	elating to the 1986 Disa	abled Person	s Act (applica	ble to pupils ove	er the age of 14 year
rliest possible leavir	ng date:	Proj	ected leavin	g date:	
hool attendance sin	ce last Annual Review	meeting =	%age		
	days/half day	vs* Possible	e Attendance	ə	days/half days
elete as appropriate	e)				

Section 2 – Accuracy of description of needs (Part 2 Description)
Is Part 2 of the Statement still an accurate description of the pupil's needs? Yes No
If No, please note significant changes in the pupil's circumstances or needs or attach a copy of a suggested amended Part 2:
•
•
•
Section 3A – Accuracy of special educational provision (Part 3 Objectives)
Objectives – describe the progress towards the objectives in Part 3 of the statement in relation to last year's targets.
•
•
•
Section 3B (Part 3 Provision) – Specify current provision being made which is additional/extra to that provided for pupils at School Action/Early Years Action or School Action Plus/Early Years Action Plus
Is the current provision in the statement still appropriate?

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Six Ar	eas of Lear	ning		Early As	sess	ment Crite	eria			[Dates		
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Creat	ive develo	pme	nt										
Key St	tage 1*					1							
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Last								iviea	sures				
Year													
This Year													
Date	tage 2*		English		1		N	laths			Science		ICT
Duto	EN1 Speakir		English Maths EN2 Reading EN3 Writing MA2 Number MA3 Shape and MA4 Handli										
	and Listenin	g					Me	asures	Data	а			
Last Year													
This		_			-								
Year													
Key Si	tage 3*		I				1						
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				udies/course			<u> </u>				<u> </u>		

* Information to include 'P' scales data as appropriate.

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Section 5 – Child/Young Person's and Parent/Carer's View				
Please advise if child/young person's views (proforma) are appended to this report	Yes		No	
Please advise if parent/carers views (proforma) are appended to this Report	Yes		No	
Please advise if the child/young person's contributed to the review Meeting	Yes		No	
Please advise if the parent/carers contributed to the review meeting	Yes		No	
If views have not been sought/provided, please give reason(s) for this				
Section 6 – Future Planning				
Health Care Planning – attach a review of the Health Care Plan if appropriate the second seco	priate			
Priorities and Target Setting Please set out below those priorities/targets agreed for the next twelve r appropriate).	nonths ((or wha	tever p	eriod is
For Year 9 pupils please advise if transition plan is appended	Yes		No	
In Year 9 and above if the plan has been amended please advise if amended plan is appended	Yes		No	
Section 7 – please summarise the discussion of the meeting				

Amendments required Yes Cease to maintain Unchanged	Section 8 – Headteacher's recommendations agreed at the Annual Review meeting to be considered by the local authority (Please refer to SEN Code of Practice, Section 9:32, 9:33, 9:34)					
Action Person taking responsibility If any of this report is not agreed by those present please record the different views expressed and by whom If any of this report is not agreed by those present please record the different views expressed and by whom This is an accurate note of the Annual Review meeting compiled by: Name: Position held: In the event of a query, please contact Signed Headteacher	Cease to maintain	Yes 🗌 No 🗌				
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In the event of a query, please contact Signed Headteacher Date:						
Signed Headteacher Date:	Name: Position held:					
	In the event of a query, please contact					
Name: (please print)	Signed H	leadteacher Date:				
	Name: (please print)					

Please send this report, together with any written advice not previously circulated, to AEO (SEN) and to the parents and to all who were invited to attend the review meeting, **within 10 days** of the meeting or by the end of term, whichever is the sooner.