special educational needs and disability (SEND) system please visit:

https://www.gov.uk/government/publications/send-code-of-practice-0-to-25.

Service Children's Education - Annual Review Document



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:							
BFPO No.:	Rank:							
	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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Service Children's Education – Annual Review Document

0 11 15 5			, .					
Section 1B - Po	ersons involv	ed/invited and/	or who	atte	ended the re	view m	eeting	g
Please record all those involved/invited and/or who attended the review meeting (see SEN Code of Practice 9:16)								
Name	Des	signation/Role	Involv	/ed	Invited ✓	Attend	ded	Report received prior to the meeting
Information requ	ired relating to	the 1986 Disal	oled Pe	rson	s Act (applicat	ole to pupi	ls over	the age of 14 years)
Earliest possible leaving date: Projected leaving date:								
School attendar	ice since last A	nnual Review r	neeting	=	%age.			
								days/half days*
(*Delete as appropriate)								
Have there been any significant periods/patterns of absence since the last review? Yes No								
If Yes, please explain including date of referral to ESW (if appropriate). (Attach attendance computer print-out if available.)								

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Service Children's Education – Annual Review Document

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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Service Children's Education - Annual Review Document

Section 4 – Levels of Attainment * see below															
Foundation Stage															
Six Are	Six Areas of Learning				Early Assessment Criteria							Dates			
Perso devel			d e	emotional											
Communication, language and literacy															
Mathematical development															
Know the w		and und	der	standing o	of										
Physi	cal de	velopm	ent												
Creat	ive de	velopm	ent												
Key St	age 1*														
Date				English					Maths			Sc	cience		ICT
		Speaking Listening		EN2 Reading		EN3 Writing	g	MA2 Nur	Spa		Shape, ice & sures				
Last Year															
This Year															
Key St	age 2*							•							
Date English			Maths						Scienc	ICT					
		Speaking istening	El	N2 Reading	El	N3 Writing	М	A2 Number	MA3 Shape and Measures		MA4 Handling Data				
Last Year															
This Year															
Key St	age 3*														
Date	ate English Maths Science ICT							ICT							
		Speaking istening	Εľ	N2 Reading	El	N3 Writing	М	A2 Number		Shape and asures	MA4 Ha Dat				
Last Year															
This Year															
Key Stage 4 and beyond (14-19)* – include other Key Areas as appropriate															
Date		Subject		Level	D	ate	;	Subject	Level		Date		Subject		Level
Include description of current studies/courses undertaken. GCSE grades or other assessments may be															
		scription propriate		current sti	Jaie	es/course	s ur	паепакеп	. GC	SE grad	ies or o	tner a	assessn	ient	s may be

^{*} Information to include 'P' scales data as appropriate.

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Service Children's Education - Annual Review Document

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 of th	oriate			
Priorities and Target Setting Please set out below those priorities/targets agreed for the next twelve nappropriate).	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				

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Service Children's Education - Annual Review Document

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)						
Amendments required Cease to maintain Unchanged	Yes No Yes No No					
Further action recommended, indicate clearly v						
Action	Person taking responsibility					
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 Date:						
Name: (plea	ase print)					

This content is no longer current and was archived on 14 June 2016. 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.

Service Children's Education - Annual Review Document

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.