## Please complete this form to request an Education, Health and Care (EHC) needs assessment of your child. When you have completed the form please return it to:

## by post: SEND Business Support Team

Hackney Education

London Borough of Hackney

## 1 Reading Lane

## London E8 1GQ

## or by email to: SENDBusinessSupport@hackney.gov.uk

If you have any questions about filling in this form, please telephone SEND Business Support Team on 020 8820 7000 option 4-1. You can also get independent help from SEND Information, Advice and Guidance Service (SENDIAGS) on 020 7275 6036.

## Once you have submitted this form, a Plan Co-ordinator from the EHC Planning Team will contact you to explain the next steps in the process and a decision on whether to conduct an EHC needs assessment will be made within 6 weeks of receipt of your request.

## Your details:

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First name(s): | | |  | | Surname: | |  | | | | |
| Date of Birth: | |  | | | National Curriculum Year: | | | | |  | |
| School: | | | | | | | | | | | |
| Gender: |  | | | | Home Language | | | |  | | |
| Ethnicity: |  | | | | Religion: |  | | | | | |
| Your Home Address: | | | |  | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | Postcode: | | |  |

## Your Parent/Carer’s Details (if under 18 or if appropriate):

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title: |  | | First Name: | |  | | Surname: | |  | |
| Relationship to young person: | | | |  | | | | | | |
| Address (if different from above): | | | | | |  | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | Postcode: | |  |
| **Telephone:** | | | | | | | | | | |
| Home | |  | | | | | | | | |
| Work | |  | | | | | | | | |
| Mobile | |  | | | | | | | | |

**Why do you want an Education, Health and Care needs assessment?**

|  |
| --- |
| **Tell us about any difficulties you’ve had in school/education.**  What things do you find hard at school?  What things do you need extra support with?  This could be to do with your learning, relationships, communicating with others, behaviour, emotions, moving about the building or general health. |
| **Who already works with you?**  Please give the details here - name and email/phone number.  (For example Social Services, Health Services, Educational Psychologists, Speech and Language Therapists, key workers/care workers/support staff and so on) |

**Data Protection Statement:**

The London Borough of Hackney (LBH) will use the information provided in this form for the purpose of deciding whether or not to conduct an Education, Health and Care Needs assessment for the above named child. LBH will only process your personal information for the purpose for which it was collected unless additional processing is required by law or in circumstances where the relevant conditions within the General Data Protection Regulation (GDPR) and Data Protection Act (2018) are satisfied.

LBH maintains and uses information collected from children and families for whom it provides services to enable it to carry out functions for which it is responsible. Your personal information, including sensitive personal information (as defined by the Data Protection Act) may be shared between internal departments or with external partners and agencies involved in delivering statutory and other services.

For further details of how we process personal data please see the LBH Privacy Statement online at: <https://hackney.gov.uk/privacy>

I hereby confirm that I have read and understood the above statement and consent to the information I have provided being processed by Hackney Education in accordance with the General Data Protection Regulation (GDPR) and Data Protection Act (2018). 🞏 Yes

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed:** |  | **Date:** |  |