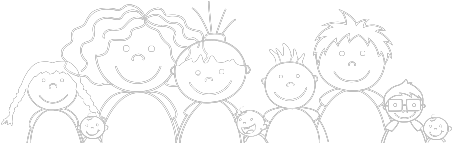
FAO: SEN Assessment Service Manager



**Request for Top-up Funding**

**for a Child or Young Person with SEND**



|  |  |  |  |
| --- | --- | --- | --- |
| **Child / Young Person’s details** | | | |
| **Legal Surname** |  | **First Name** |  |
| **Date of Birth** |  | **M/F** |  |
| **Home Address** |  | **NC Year** |  |
| **UPN** |  |
| **Setting name** |  | **SENCo** |  |

**Please tick if the child/young person is any of the following:**

Pupil Premium  LAC  EAL  Armed Forces Family

**Which services have given advice in support of this application?**

Educational Psychology  Autism Outreach  Specialist Teaching Services

Behaviour Partnership  Health Service  Social Care Service

Other service (please name)

**What are the child/young person’s areas of need? (Tick all that apply)**

Cognition & Learning  Communication & Interaction  Physical & Sensory

Social, Emotional & Mental Health  Health Needs  Social Care Needs

Other Needs

|  |
| --- |
| **The reason for this request**   * Explain here in brief why top-up funding is needed to meet the child/young person’s needs |
|  |

**Training**

Have all staff had training in the child/young person’s area of need?

Yes  No

If yes, what training have they had?

|  |
| --- |
|  |

**Please attach:**

SEN Support Plan

Report from the service supporting this request

**You may also wish to include:**

Provision map or current IEP

Annotated timetable showing current levels of support

Other recent evidence you consider relevant

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signature** | | | | | |
| **Signed** |  | **Position** |  | **Date** |  |

**Return to:** SEN Assessment & Commissioning Service (SENA) via AnyComms at <https://filetransfer.leics.gov.uk>