

**Attendance Service Persistent Absence (PA) Referral Form**

**This referral requires the pupil to have missed at least 10% of their possible sessions – this must include at least 10 sessions of unauthorised absences in any 12 week period.**

 **SCHOOL ………………………………………………………Contact Name / Phone…………………………....................**

|  |  |
| --- | --- |
| **Pupil Details** NAME **(FULL)**………………………………………………………………………………………………M/F.........................................................................DOB: .................................................. Address...............................................................................................…………….......................…………………………………………………………Post Code………………………………Ethnicity……………………………………………………………………………………………Year Group………………………………………….Tutor Group………………..Is the pupil a Child Looked After (CLA) ? Yes/No………………………………………Is the pupil eligible for FSM? Yes/No…………………………………………….Does the pupil have an EHC Plan? Yes/No…………………………….Has a MARF been completed? Yes/No………………………………………….Other relevant information ………………………………………………………..……………………………………………………………………………………….Known previous enforcement action (i.e. warnings/fines/prosecution)………..………………………………………………………………………………………..Current attendance rate: ……………………………………………………….…Number of sessions absent: ………………………………………………………**Please attach Attendance Certificate** | **Parent/Carer Details** **Parent/Carer 1**NAME **(FULL)**………………………………………………………………..Address (if different from pupil) …………………………………………..……………………………………………Post Code………………………Contact Details :Tel numbers/email address: ...................................................................................... ...........................................................................................................**Parent/Carer 2**NAME **(FULL)**………………………………………………………………..Address (if different from pupil) …………………………………………..……………………………………………Post Code………………………Contact Details :Tel numbers/email address:...................................................................................... ...........................................................................................................If parents live separately do both parents have an active involvementwith the child’s education? Yes/No/Other info………………………………………...…………………………………………………………………………………Any other relevant parental information? Yes/No………………..  ……………………………………………………………………………….. |

|  |
| --- |
| **Reasons for absence**– schools to provide as much detail as possible, this could include a print out of reasons from SIMs |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Record of school action before referral to Attendance Service**Details of contact- (for example) Telephone calls, letters, school meeting etc. (N.B. Pease attach copies of each)

|  |  |
| --- | --- |
| Action   | Date |
|  |  |
|  |  |
|  |  |

 |

**Other agencies involved**: e.g. Social Care, Police, Youth Justice, FIRST or any other relevant information:

…………………………………………………………………………………………………………………….

…………………………………………………………………………………………………………………….

**I confirm that the school will not routinely authorise any further absences without justifiable evidence and that parent(s)/carer(s) will**

**be advised of this fact and that this referral has been made to the Attendance Service once the parent has been notified.**

**SIGNED ........................................................PRINT NAME ............................................................DATE …………………**

**POSITION……………………………………………………………………………………………………………………………….……………………………**

LA only: Date received by AS…………………………….. Approved referral (Officers name and date)………………………………………………….