**Explanatory Notes for Completion of**

**Documentation for ALL Slough School Suspensions (fixed term exclusions)**

**Please find below explanatory notes on the paperwork required to be completed, and when, for ALL notifications of Slough Suspensions.**

**Suspensions – the Local Authority and Social Worker (if appropriate) MUST be notified without delay, regardless of the length of the suspension.**

For a suspension of more than 15 school days in one term the governing body must convene a meeting to consider reinstatement within 15 school days of receiving notice of the suspension.

For a suspension of more than 5, but not more than 15 school days in one term (which does not bring the pupil’s total number of days of exclusion to more than 15 in one term), the governing body must convene a meeting to consider reinstatement within 50 school days of receiving notice of the fixed period exclusion, to consider the exclusion, ***but only if the parent requests such a meeting*.**

The governing board must convene a meeting to discuss the exclusion within 50 school days but does not have the power to decide whether to reinstate the pupil, ***but only if the parent requests such a meeting***

Please **fully** complete the Suspension Form (EX2)and forward to

**Paula Doneghan, In-Year and Fair Access Team Leader**

[**Paula.doneghan@slough.gov.uk**](mailto:Paula.doneghan@slough.gov.uk) **and** [**fairaccess@slough.gov.uk**](mailto:fairaccess@slough.gov.uk)

**Suspension Form – All Sections must be completed**

**SECTION A – School and Student Details:**

|  |  |  |
| --- | --- | --- |
| **excluding school:** | | |
| **forename of child:** | | **surname of child:** |
| **dob: dd/mm/yy** | **gender: male  female** | |
| **upn:** | | **year group:** |
| **address:** | | |
|  | | **post code:** |
| **SLOUGH LA Pupil:**  YesNo | **Other LA: (Provide details)** | |
| **Free School Meals (FSM) required:** | **Yes  No** | |

**SECTION B – Suspension Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **type of Suspension: fixed period:  lunchtime:** | | | **first day of Suspension: dd/mm/yy** |
| **Last day of suspension: dd/mm/yy** | **Number of days** | | |
| **date of discipline committee / reintegration meeting, if required dd/mm/yy** | | | |
| **Is this the pupil’s first suspension** YesNo | | | |
| **primary reason for exclusion (national category) – please cross one reason only** | | | |
| **Use of Threat of an offensive weapon or prohibited item** | | **Abuse against sexual orientation and gender identity** | |
| **Abuse relating to disability** | | **inappropriate use of social media or online technology** | |
| **wilful and repeated transgression of protective measures in place to protect public health** | | **physical assault against adult** | |
| **physical assault against pupil** | | **physical assault against adult** | |
| **verbal abuse/threatening behaviour against pupil** | | **bullying** | |
| **verbal abuse/threatening behaviour against adult** | | **racist abuse** | |
| **sexual misconduct** | | **drug and alcohol related** | |
| **damage** | | **persistent or general disruptive behaviour .** | |
| **Theft** | |  | |
| **additional information (must be completed)** : | | | |

**SECTION C – Monitoring Information:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ethnicity:** | **religion:** | | | | **home language:** | | | |
| **does the pupil have special educational needs? *if yes*, *please tick sen stage*** | | yes  no | | EHCP | | | under assessment | |
|  | | |  | |
| **is the pupil in public care?** yes  no  Public Care means either:   * The child is accommodated by a Local Authority, and placed with a foster carer or in a children’s home, or * The child is subject of a care order (s. 31 Children Act 1989) | | | | | | | | |
| **does the pupil have a psp / iep / pep (please attach)** | | | **psp** yes  no | | | **iep** yes  no | | **pep** yes  no |

**SECTION D – Contact Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **school contact:** | **name:** | | | **telephone number:** | |
| **parent/carer name:** | | | | | |
| **contact telephone:** | | **home:** | **work:** | | **mobile:** |
| **other contact details – name:** | | | | | |
| **address:**  **post code:** | | | | | |
| **Email~:** | | | | | |
| **contact telephone:** | | **home:** | **work:** | | **mobile:** |

|  |  |  |
| --- | --- | --- |
| **name of person completing form & designated post** (**block capitals)** |  | |
| **signature:** | | **date:** |

|  |  |  |
| --- | --- | --- |
| **Headteacher** |  | |
| **signature:** | | **date:** |

**Please note: This form must be signed by the Headteacher**

|  |
| --- |
| **Please send this form together with a copy of the letter sent to the pupil’s parent/carer to:**  **Paula Doneghan, In-Year and Fair Access Team Leader**  **Email:** [**paula.doneghan@slough.gov.uk**](mailto:paula.doneghan@slough.gov.uk) **and** [**fairaccess@slough.gov.uk**](mailto:fairaccess@slough.gov.uk) |