



Frank Wise School Outreach Service Pupil Referral Form

Pupil Name :		Age & Year Group :
School :	Staff Contact :	
School Phone :	School E-mail :	
Please describe the pupil's general level of ability : 		
Are you using any other support services with regards to this pupil? 		
Reasons for referral : 		
What support do you feel would be helpful? 		
Signed :		Date :



Parent / Carer Consent for Outreach Support

Frank Wise School is a Specialist School with a specialism in Cognition and Learning. Part of our work is to provide support for staff in mainstream schools. The focus of this support is enabling staff working with children to develop their knowledge and understanding in order to ensure that appropriate progress is made.

When we are providing support for a specific child, it is necessary for the consent of the Parent/Carer to be given. Please can the following consent form be completed and returned to the child's teacher.

Pupil's Name :

I give permission for Frank Wise School to work with my child in an outreach capacity, and to share information with other relevant professionals.

Name :

Signed :

Date :

Relationship to pupil :

Further comments or information :