

**Barnsley EAL and Traveller Achievement Form: Student Referral Form**

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| --- | --- |
| Name of Organisation making referral | Date of referral |
|  |  |
| Person making referral | Contact email address |
|  |  |

**Student Details**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of student requiring support | | | | | D.O.B | Year Group | | Gender | | am or pm Nursery |
|  | | | | |  |  | |  | |  |
| Language spoken | | Ethnicity | | | Faith | | | Nationality | | |
|  | |  | | |  | | |  | | |
| Address | | | Contact telephone No | | | |  | | | |
|  | | | | | | | | | | |
| Reason for referral: | | | CAF Completed: | | | | YES | | NO | |
|  | | | | | | | | | | |
| Date of arrival in UK: |  | | | Date of admission to school/setting: | | | | |  | |
| Actions school/setting has taken to date: | | | | | | | | | | |
|  | | | | | | | | | | |
| Other agencies involved: | | | | | | | | | | |
|  | | | | | | | | | | |

**Family Details**

|  |  |  |
| --- | --- | --- |
| Name of parent/carer/siblings: | Relationship with student: | Age: (If sibling) |
|  |  |  |
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**For Internal use only:**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| No further action because: | | |  | | | | | Date: | |  | |
| Allocated worker: | | |  | | | | | | | | |
| Referral reasons: (please tick) | | |  | | | | | | | | |
| Support **in** school **(EAL)** | | Child in Care (Looked after) **(LAC)** | | | Racist Incident **(RAC)** | Welfare  **(WEL)** | | | **(EHE)**  Elective Home Ed | | |
| Admission/ Transition **(TRAN)** | | Child in Need/ Child  Protection **(CP)** | | | Wayside Camp **(WAY)** | Attendance  **(ATT)** | | | **(CME)**  Child Missing Ed | | |
| Support **in** school **(GRT) Gypsy Roma Traveller** | | Support **in** school  (Ethnic Minority) **(ETH)** | | | Education & Support  **out** to school  **(EOS)** | | Signposting  **(SIGN)** | | | | New Arrival  **(NEW)** |
| Action: | Single session support | | | SMART Core | | | SMART Supplementary | | | | |

Please return form to: Admin – [admincd@barnsley.gov.uk](mailto:admincd@barnsley.gov.uk)