

Early Identification of Need Parents Sheet

Child's Details			
Name			
Class			
What area of need are you most concerned about?			
Cognition and Learning	Communication and Interaction	Social, Emotional and Mental Health	Sensory and Physical
What are your MAIN concerns?		Are these concerns/ traits seen at home, school or both?	
Have you spoken with the class teacher? If so, has any advice been given?			
Signed: (Parent) _____		Date: _____	
Signed: (Class Teacher) _____		Date: _____	

For SENCO use only:

Copied directly from, The London Borough of Bexley's: Quality First Teaching and Special Educational Needs Support Toolkit for Leigh Academies Trust (London Borough of Bexley, 2019, p.25).

Received by SENCO on:	
Advice given:	Actions to be taken:
To be followed up by:	
Designated person:	Deadline: