



First Name		Surname	
Also Known As		Date of Birth	
UPN		Legal Status	
Became Looked After		School	
LAC Designated Teacher		Telephone Number	
Social Worker		Telephone Number	
Name and Address of Carer			

Attainment	KS1 result	End of last academic year	Current level / stage / score	End of year target	Progress towards national expectations is:
Reading					Below ☐ At ☐ Above ☐
Writing					Below ☐ At ☐ Above ☐
Maths					Below ☐ At ☐ Above ☐

Attendance		Comments:
Last academic year:		
September to date: Unauthorised absence:		

SEN: ADDITIONAL NEEDS Special Educational Needs Identified: ☐ Yes ☐ No		Nature of SEN, if any (tick all that apply)
☐ Additional SEN support	☐ Cognition and learning	
☐ Statement of SEN / EHC Plan	☐ Emotional, behavioural and social	
☐ Date of statement/plan:	☐ Communication and interaction	
	☐ Sensory and physical	
	☐ Date of next review:	
What do the special educational arrangements consist of (Please include any support provided within school)? 		

Copy of IEP attached to this PEP: Yes ☐ No ☐

My name is

At school I am good at...

These things help me to learn

I use a computer:

☐ at school

☐ at home

I would like help with...

I am really proud of...

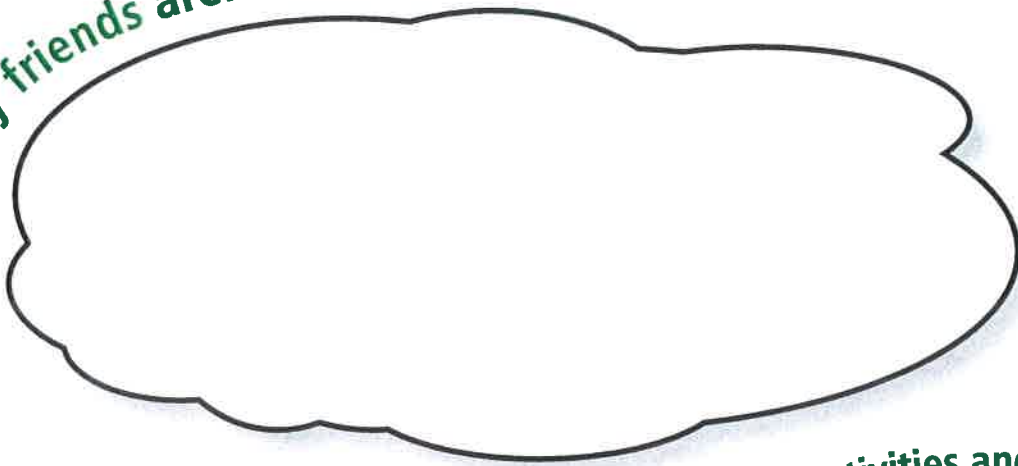
The best thing about school is...

My school is

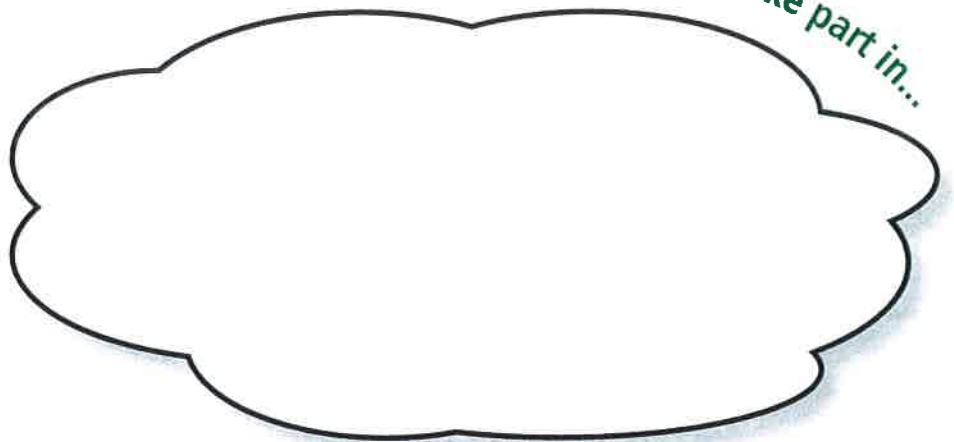
Please circle



My friends are...



Activities and clubs I take part in...



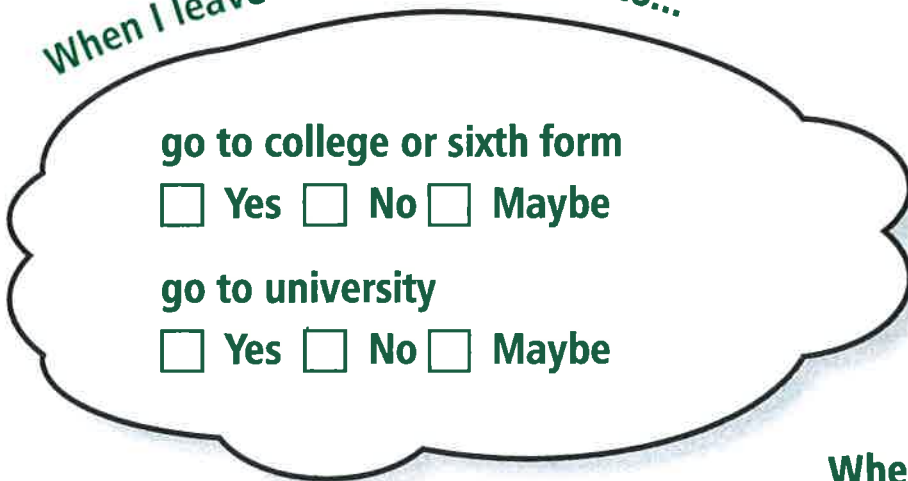
When I leave school I would like to...

go to college or sixth form

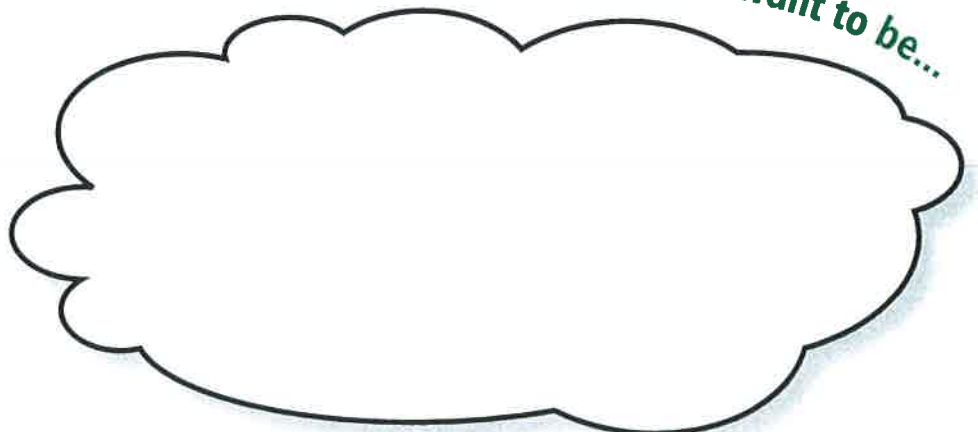
☐ Yes ☐ No ☐ Maybe

go to university

☐ Yes ☐ No ☐ Maybe



When I grow up I want to be...



PEP Meeting. Record of attendance		Date of meeting	
Young Person		Designated Teacher	
Carer/Keyworker			
Social worker			

Please start the meeting by highlighting this young person strengths and achievements

Review Previous Targets	Achieved? (Y/N)	Progress made or comment?

Summarise the main issues discussed (e.g. attendance, progress, aspirations)

Agree new targets	By when	Who will support

Are there any additional resources, support or interventions required not funded by the Pupil Premium?

Request:	Cost	
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Signed _____ Date of next meeting _____
 Young person _____ Time _____
 Location _____