[](https://pbs.twimg.com/profile_images/827171968759824385/9D2gcB7H_400x400.jpg)**Hull Clinical Commissioning Group**

|  |  |
| --- | --- |
| **Parent/Carer Information**  **To support Education, Health and Care Needs Assessment Request** | |
| **Child’s Name:** |  |
| **Date of Birth:** |  |
| **Name of Parent/Carer:** |  |
| **Date of Completion:** |  |

Parents and Carers can access support to complete this form from the following places:

* Your Child’s School
* SENDIASS

**Website:** [www.kids.org.uk/Hull-sendiass](http://www.kids.org.uk/Hull-sendiass)

**Email:** [enquiries.yorkshire@kids.org.uk](mailto:enquiries.yorkshire@kids.org.uk)

**Phone:** 01482 467 541

* Through conversation with the SEND Assessment and Review Team

**Email:** [SEND@HullCC.gov.uk](mailto:SEND@HullCC.gov.uk)

**Telephone Number:** 01482 616007

|  |  |
| --- | --- |
| **Parent/carer views** | |
| What do you hope will be achieved as a result of this request for Education Health and Care Assessment? | *Why is a request for assessment being submitted now?*  *What do you hope this process will provide for your child?*  *What difference would an EHC Assessment make?* |
| If an assessment is agreed I/we would like further or more up to date information to be requested from the following practitioners | *Are there practitioners who you would like up to date information or advice from if an Education, Health and Care Assessment is agreed?*  *This is an opportunity to identify those who know your child well and who are able to provide details on their strengths, difficulties and support which is in place or required.*  *This may include people such as health or medical practitioners, family support or social workers, voluntary support agencies, youth group or after school club leaders etc.* |
| Is there any information you would like to share relating to your child’s Special Educational Needs to support a request for an Education Health and Care Assessment? | *This is an opportunity for parents/carers to provide additional information at this early stage if they wish. There is no requirement for this box to be completed.* |

**Please return this form, together with any additional reports that you wish to be considered to:**

**By post:** SEND Assessment & Review Team, Hull City Council, Brunswick House, Strand Close, Beverley Road, Hull, HU2 9DB

**By e-mail:** In Microsoft Word format to: [SEND@hullcc.gov.uk](mailto:SEND@hullcc.gov.uk)

**By secure e-mail:** Please contact the SEND Assessment and Review Team (01482) 616007