

**DETAILS OF SUSPENSION**

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| **School Details** |
| **School** | **LA School Number** | **DfE School Number** |
|  |  |  |
| **Type of School(Maintained, Foundation, Single Academy, MAT)** | **On roll date** | **UPN** |
|  |  |  |

 **Please complete form and at your earliest convenience send with the letter informing parents of the suspension to:** **exclusions@hertfordshire.gov.uk**

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| **Pupil Details** |
| **Pupil’s First Name** | **Pupil’s Surname** |
|  |  |
| **Date of Birth** | **Year Group** | **Gender** | **Ethnicity** |
|  |  |  |  |
| **Pupil’s Address** |
|  |
| **SEND (tick most applicable box)** |
| [ ]  **None**  | [ ]  **SEN support** | [ ]  **EHC assessment** | [ ]  **EHCP** |
| **Date request EHC request submitted and current stage of statutory assessment** |
|  |
| **Name of current SEND Case Worker** |
|  |
| **Child Looked After** **(CLA)** | **Not Looked After now but were previously Looked After** | **If Looked After or Previously Looked After, please list Home LA if not Hertfordshire** |
| **Yes/No** | **Yes/No** |  |
| **Name of CLA Advisory Teacher** | **Name of Social Worker** |
|  |  |
| **Parent Details** |
| **Name of Parent(s)/Carers(s) with parental responsibility** | **Relationship to Pupil** |
|  |  |
| **Parent(s)/Carer(s) Telephone Number** |
|  |
| **Email address for parent** (Please ensure this is their current email address) |
|  |
| **Contact Address if different from child’s address** |
|  |
| **Suspension** |
| **Type of Suspension** | Lunchtime |[ ]
|  | 1 – 5 days  |[ ]
|  | 5 – 15 days |[ ]
|  | 16 + days | [x]  |
| **Start Date**  | **End Date** | **Reason for Suspension**Delete as appropriate leaving one most applicable optionPlease be explicit about the reason |
|  |  | PP – Physical assault against a pupilPA – Physical assault against an adultVP – Verbal abuse/ threatening behaviour against a pupilVA – Verbal abuse/ threatening behaviour against an adultOW – Use or threat of use of an offensive weapon or prohibited itemBU – BullyingRA – Racist abuseLG – Abuse against sexual orientation or gender identityDS – Abuse relating to disabilitySM – Sexual misconductDA – Drug or alcohol relatedDM – Damage TH – Theft DB – Persistent disruptive behaviourMT – Inappropriate use of social media or online technologyPH – Wilful and repeated transgression of protective measures in place to protect public health |
| . Details of the Incident: -*If, for example, the pupil has sworn at a member of staff, state what was said. If there has been violence used by the pupil, say what actually happened. The use of terms like "aggressive behaviour" or "abusive language" is not clear. They do not give us a precise picture of the problems that a particular school is facing. If it is a drug related suspension, do not use terms such as “illegal or illicit substance”, specify which drug. If the incident is weapon related, please advise what type of weapon and if it was used against someone.* |
| **If reason is for a criminal offence, have the police been informed?** |
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| **Involvement from other professionals**  |
| **Social Care** |[ ]  **IFST**  |[ ]
| **Educational Psychologist** |[ ]  **School Nurse** |[ ]
| **Specialist Advisory Service**Early Years, SLCN & Autism, HI & VI, PNI |[ ]  **Police/ Youth Justice** |[ ]
| **Special School outreach** |[ ]  **SASH** |[ ]
| **ESC/PBS Outreach**  |[ ]  **Youth Support Service** |[ ]
| **OtherPlease state:**  |[ ]
| **Please outline involvement and relevant contacts** |