**REFERRAL FOR SUPPORT FROM SCHOOL**

Please complete the information below and return this form to Thomas Rowell via email trowell@bemat.org.uk, by post, or just drop it into school. In order to request support, your child must be eligible for the Pupil Premium

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Referral:** | Click here to enter text. | | | | | | | |
| **Parent/Carer’s Name:** | Click here to enter text. | | | | | | | |
| **Student’s Name:** | Click here to enter text. | | | | | **Tutor Group:** | Click here to enter text. | |
| **Assistance Required With:** | | | | | | | | |
| Uniform: | | |  | School trip assistance: | | | |  |
| Equipment for school, including computer: | | |  | Transport Support: | | | |  |
| Books and resources: | | |  | Mobile Internet Support: | | | |  |
| **Uniform Request** *(please give sizes, and quantity – up to a maximum of £75 per student)* | | | | | | | | |
| Sweatshirt:Click here to enter text. | | Trousers/Skirt:Click here to enter text. | | | Polo Shirt:Click here to enter text. | | | |
| Shoes:Click here to enter text. | | PE Shorts:Click here to enter text. | | | PE Shirt:Click here to enter text. | | | |
| Any other item:Click here to enter text. | | | | | | | | |
| **Equipment or Resources:** *(for example, stationery, book titles, subject resources etc.)* | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| **School trip assistance** *(it is unlikely that the full cost of a residential trip will be met)* | | | | | | | | |
| Name of trip:Click here to enter text. | | | | | | | | |
| **Parent/Carer Signature:** | Click here to enter text. | | | | | | | |