**Secondary: Permanent Exclusion Referral form**

**PUPIL DETAILS**

|  |  |
| --- | --- |
| **NAME:** |  |
| **DOB & YEAR GROUP:** |  |
| **MALE/FEMALE:** |  |
| **ADDRESS:** |  |
| **ETHNIC BACKGROUND CODE:** |  |
| **SEN STAGE:** |  |
| **UPN:** |  |

**PARENT/CARER DETAILS:**

|  |  |
| --- | --- |
| **NAME:** |  |
| **ADDRESS:** |  |
| **CONTACT NUMBER:** |  |
| **LAC:** |  |

**EXCLUDING SCHOOL DETAILS:**

|  |  |
| --- | --- |
| **NAME OF SCHOOL:** |  |
| **BOROUGH:** |  |
| **CONTACT NAME AND TELEPHONE NUMBER/EMAIL:** |  |
| **ADDITIONAL INFORMATION IF APPLICABLE:**  |  |

**EXCLUSION DATES:**

|  |  |
| --- | --- |
| **DATE OF EXCLUSION:** |  |
| **6th DAY PROVISION DATE::** |  |

**EXCLUSION REASON:**

|  |  |
| --- | --- |
| **Bullying** |  |
| **Damage** |  |
| **Drug and alcohol related** |  |
| **Persistent disruptive behaviour** |  |
| **Physical assault against adult** |  |
| **Physical assault against pupil** |  |
| **Racist abuse** |  |
| **Sexual misconduct** |  |
| **Theft** |  |
| **Verbal abuse / threatening behaviour against adult** |  |
| **Verbal abuse / threatening behaviour against pupil** |  |
| **Other\*** |  |

**\*Other** includes incidents which are not covered by the categories above but this category should be used sparingly.

**FORM COMPLETED BY:**

**EMAIL**:

**DATE: 30/12/16**

**TELEPHONE:**