# Children Missing Education (CME) referral form

Please complete all sections and provide a current registration certificate and any relevant documents.

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| School: |
| UPN: |
| Name: |
| Year group: |
| Date of birth |
| Male/Female: |
| Ethnicity: |
| Synergy ID:(AASSA use only) |
| Address: |
| Parent’s/Carer’s Full Name/s: |
| Contact telephone numbers and email address: |
| Siblings (name and school if known): |

## Percentage of attendance

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| Attendance: % |
| Unauthorised Absence: %   |
| Number of unauthorised absence sessions:  %  |

## Additional information

Child missing education (Additional information must be completed)

Student must remain on roll for 20 school days – discussion required with CME officer

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| Emergency contact numbers(All contacts and telephone numbers): |

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| Forwarding address: (You must get this from the school even if address is abroad): |
| Last day of school attendance: |
| Circumstances:  |

## Enquiries made - all schools to complete

Attach all contact names and numbers, email, date contacted and outcomes.

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| Dates of telephone calls: | Numbers: | Outcome: |
| Dates of Email: | Email address: | Outcome: |
| Dates of Letters sent: | Type of letter: | Outcome: |
| Date of Home Visit (if applicable): | Name of person undertaking Home Visit: | Outcome:Property appears lived in/vacant: |

|  |  |
| --- | --- |
| Name of referrer:Signature: | Contact details: |
| Agency/School/Service: | Date: |
| Referred to Children Missing Education Officer | Date: |
| Destination School | Name: |
| Date on roll: | Date: |