

Y6/7 Transition Request for Support - Information

The KS3 enhanced provision at Moulsham Junior School works specifically with students in Year 7 or 8 across Mid Essex to support transition from Primary to Secondary. We aim to work supportively and co-operatively with the families and caregivers of the student, as well as the referring provision and any other agencies.

Each request is heard at a panel meeting which consists of representatives from the SEMH Enhanced Provisions, the local authority, local schools and other relevant services.

Requests will be considered at panel based on the following criteria:

- SEMH is the main area of need
- TPP is adopted as a whole-school approach
- High quality SEND support has been in place, including support from the SEND Inclusion Team
- The school is prepared to work in partnership and maintain their inclusion
- Parental consent is agreed
- **Transport can be provided (for placements).**

If you are confident that you can meet the above criteria, please continue to complete this Request for Support Form and send it to:

Jo Brown, Head of Provision – 07355 091632 - [Moulsham Enhanced Provision](#) or complete the request for support and send securely to jbrown@moulsham-jun.essex.sch.uk

Submission deadline dates	Panel dates
25 th September 2025	9 th October 2025
27 th November 2025	11 th December 2025
22 nd January 2026	5 th February 2026
26 th February 2026	12 th March 2026
30 th April 2026	14 th May 2026
18 th June 2026	2 nd July 2026

Further information about all SEMH Enhanced Provisions can be founds here:

[SEMh enhanced provision: SEMh enhanced provision | Essex Schools Infolink](#)

Please be aware of the following additional considerations that may influence panel decisions:

- Current cohort within the provision
- Provision capacity
- Other pupil needs which require further assessment.

Request for Support

Student Information

Surname (legal)	
Surname (known as)	
Forename	
Date of Birth/Year Group	
Ethnicity/Gender	
UPN	
PPG	Yes/No
FSM	Yes/No
CiC	Yes/No
Attendance %	Please attach Attendance Report
Current Educational Provision	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Alt Ed <input type="checkbox"/>
SEND Needs	<input type="checkbox"/> EHCP - Band _____ <input type="checkbox"/> EHCNA – Date requested _____ <input type="checkbox"/> SEN support Please attach latest One Plan
SEND Area of Need	
Date of last meeting/next meeting	
Diagnosed conditions	ADHD/ODD/ASD etc
Key Stage 2 data (predicted/actual)	Reading: Writing: Maths:

Parent/Carer Information

Parent/Carer 1 – contact details

Name	
Address	
Telephone Number	
Email	

Parent/Carer 2 – contact details

Name	
Address	
Telephone Number	
Email	

Family Information, Views and Consent

Family Members	
Family circumstances	
Any other significant factors	
Transport arrangements confirmed with parents	Yes/No
Mode of transport	Walk/ Cycle, Parent to drive, Bus/ Taxi funded by secondary school
Student views	
Family views	
Signed	
Date	

Agency Involvement

Agency	Finish/start date	Key worker details	Outcome/Impact	Report Attached
Family Solutions				Yes/No
Attendance monitoring				Yes/No
Education Psychology				Yes/No
Inclusion Partner Please state if parental consent has been given or student was discussed anonymously				Yes/No
Health Services				Yes/No
Youth Offending team				Yes/No
Paediatrician/GP				Yes/No
CAMHS				Yes/No
MHST				Yes/No
Community Police				Yes/No
Power/Affinity Project				Yes/No
Education Access				Yes/No
Virtual School				Yes/No
Alternative Provision				Yes/No
Other (please specify)				Yes/No

Child Protection/Safeguarding Information

Social Care Involvement	CIN/CP (delete as appropriate)
Social Worker Name	
Telephone Number	
Email	
Date CIN/CP open	
Date of last meeting	
Date of next meeting	
Risks	Y/N (please consider leaving site/physical aggression/attendance/home visits etc)

Education Information

Name of current school/provision		
Name of Secondary School in Y7		
TPP Status of Secondary School	Totally embedded	<input type="checkbox"/>
	Partially embedded	<input type="checkbox"/>
	Attended Train the Trainer	<input type="checkbox"/>
	Attended Elements 1 & 2	<input type="checkbox"/>
	Expressed interest	<input type="checkbox"/>
Please state if any other provisions have been attended in this academic year		
Referrer's name		
Role		
Email		
Telephone Number		
Is the Secondary School SENCo aware of this request?	Yes/No	

Supporting Information

<p>Support requested (please tick) The outcome of the request will be one of the following:</p> <ul style="list-style-type: none"> - Consultation, advice and signposting - Outreach support - A short-term, partnership placement in an SEMH Enhanced Provision. 	<p>Consultation, Advice & Signposting <input type="checkbox"/></p> <p>Outreach Support <input type="checkbox"/></p> <p>A short-term, partnership placement <input type="checkbox"/></p>
<p>Reason for request for support (Include which assessment tools have been used, and details of strengths, areas of need, family context, significant contributing factors)</p>	
<p>What support is currently in place?</p>	
<p>What is working well?</p>	
<p>What is not working?</p>	
<p>Supporting information from the Secondary School</p>	
<p>Desired Outcomes</p>	