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| Setting (Nursery/or Childminder)  Please print your setting name: | Early Support  Early Years and Childcare Team  Ground Floor,  Sand Martin House,  Bittern Way,  Fletton Quays,  Peterborough,  PE2 8TY  Telephone: 07920160742  Email: [susan.ishmael@peterborough.gov.uk](mailto:susan.ishmael@peterborough.gov.uk) |

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| Please add your Early Support Reference Number: |  |

For the attention of the setting Senco,

According to our records, you have a child that is on the Early Support pathway who is due to start their Reception year in September 2024.

To help ensure a smooth transition into school we would like to gain parental/carer consent to contact their allocated school. To help support a smooth transition.

Please could you ask the parent/carer of this child to sign the attached form\* stating that they are consenting to the Early Support Coordinator contacting their allocated school to advise that this case is open to Early Support so they may request access to the episode and if not already been organised- to contact you to discuss a transition meeting.

\*Please ensure parents/carer sign and date the form and return to Jay Shergill (business support officer for the Early Years Team) within 5 working days - jasbir.shergill@peterborough.gov.uk

Dear Parent/Carer

We recognise that the move into school can be a time of many questions and worries. As part of the Early Support Pathway- we aim to support you and your child in this transition by contacting your child’s allocated school by letter /and or any specialist services that may be required to support your child by recommending that they contact your current preschool setting to organise a transition meeting/or telephone consultation with the setting-if not already organised.

By signing below, you are agreeing for the Early Support Coordinator to contact your allocated school to recommend that they organise a transition meeting/or phone consultation to help support the transition -if this has not already been organised and for the Early Support Coordinator to advise the allocated school -that there is a current Early help episode open so they may request access from you -to the open episode. Without this signed consent we cannot liaise with your child’s new school.

As the parent/carer -I consent to the Early Support Coordinator or her representative to contact my child’s allocated school to recommend that the school and setting liaise or arrange meetings/phone consultation as appropriate to help support the transition into school/and to advise specialist services of allocated school where needed.

Parent Signature:

Print Parents name:

Print Name of child:

Name of Nursery Setting:

Name of Allocated School:

Date: