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| **Children Missing from Education (CME) School Referral Form** |
| **Please provide as much information as possible in order to assist with our further investigations.** |

We will use the information within this form to record, give advice and follow the Children Missing Education, statutory guidance for local authorities**.** As part of this, the local authority may need to share your information provided with other Local Authorities and services. Any other information provided subsequently, whether by meeting, phone, fax or mail, might also be used for this purpose.More information on how we handle personal information and your rights under the data protection legislation can be found in the local authority’s Privacy Notice.

**Section 1**

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| Name of School | Contact person in school | Position |
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| Telephone Number:  Email Address: | | |
| Date form completed: | | |

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| **If this student/s have been removed from roll at the time of submitting this form, please indicate which regulation applies.**  [**https://www.gov.uk/government/publications/children-missing-education**](https://www.gov.uk/government/publications/children-missing-education) |  |

**Section 2**

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| **Pupil Details:** | Current address: |
| Forename: |
| Middle Name(s): |
| Surname: |
| DOB: | Forwarding address: |
| Alias: |
| Unique Pupil Number: |
| Gender: |
| Year Group: | Temporary accommodation? |
| Ethnicity: |
| Date child last attended school: |
| Does the child speak English? |
| If this is a move overseas, has the parent confirmed the move is permanent – Yes/No/N/A |  |
| How was this information shared with school?  **Please provide any information you have to support this** |  |

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| **Sibling’s details:** | | | |
| Name | DOB | Address | School |
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| Do you consider these child/children to be CME cases as well: YES/NO | | | |

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| **Section 3**  **Parent/carer**: |  |
| Relationship to child: |  |
| Contact details: |  |
| Landline: |  |
| Mobile: |  |
| E-mail: |  |
| Family’s first/home language: |  |
| Is an Interpreter required? |  |

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| **Parent/carer**: |  |
| Relationship to child: |  |
| Contact details: |  |
| Landline: |  |
| Mobile: |  |
| E-mail: |  |
| Family’s first/home language: |  |
| Is an Interpreter required? |  |

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| **Other contact information held by School: Relatives etc** | |
| Name |  |
| Address |  |
| Telephone number |  |

**Section 4**

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| **What is the primary reason for referring this child to your CME?** | **Please indicate as appropriate.** |
| Child has failed to take up a place at your school |  |
| Child’s whereabouts are unknown |  |
| Parent is fleeing domestic violence |  |
| Child/ family is reported to have left the area |  |
| Child is reported to have left the UK with/without parents / carers (please complete section 8) |  |
| Child has failed to return from an agreed holiday in term time |  |
| Child has failed from an unauthorised holiday in term time |  |
| Parents have taken child out of school for an extended period without school agreement |  |
| Child has failed to return after summer holidays and whereabouts are not known. |  |

**Section 5**

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| **Prior to submitting CME paperwork, School to:** | **Please indicate as appropriate.** |
| Home visit to the last known address |  |
| Check emergency contact number |  |
| Check free school meals database |  |
| Check records to see if there are siblings at another school - ring school |  |

**Section 6**

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| **Is this child:** |  |
| A Looked After Child? | YES/NO |
| Gypsy, Roma or Traveller? | YES/NO |
| A Refugee or Asylum Seeker? | YES/NO |
| Living in temporary accommodation | YES/NO |
| Subject to a Child Protection Plan | YES/NO |
| An open case to Childrens Social Services/Early help | YES/NO |
| Name of allocated Social Worker/Early Help worker and contact details: |  |
|  | |

**Section 7**

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| Do you have any reason to be concerned that any of the following may be relevant in this case? (If answered Yes please give details) |
| Risk of child sexual exploitation (CSE) YES/NO |
| Risk of child being missing/running away from home YES/NO |
| Risk of child trafficking YES/NO |

**Section 8**

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| **Please provide full details of all enquiries including telephone calls, home visits** | | |
| Date | Action taken | Outcome |
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Section 9

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| **Information required for children leaving / left the UK** | | | |
| Please try and provide as much of the following information as possible, especially in cases where you have an indication of an intention for the family/child to leave the UK. Please give consideration to the possibilities of forced marriage, that those presenting themselves as parents/family/carers are not genuine, child trafficking, child sexual exploitation or that the child (ren) may not be leaving the country as reported. | | | |
| Proposed date of departure from UK | | |  |
| Actual date of departure (if already left) | | |  |
| Point of departure- airport, coach station etc. | | |  |
| Time of departure | | |  |
| Flight numbers and name of airline | | |  |
| Have you seen copies of the tickets? | | |  |
| Please attach copies of tickets if possible | | |  |
| What country are they returning to? | | |  |
| **Who is leaving the UK (please tick all that apply)** | | | |
| Mother | | |  |
| Father | | |  |
| Other siblings that are not part of this referral | | |  |
| Extended family (please give details) | | |  |
| **If child (ren) is not leaving with parent(s) who is accompanying them?** | | | |
| What is their relationship to the child? | | | |
| Why is / are the parent (s) not leaving with the child (ren)? | | | |
| Who will be caring/ responsible for the child (ren) | | | |
| Please obtain | | | |
| Name |  | | |
| Relationship to the child: |  | | |
| Address: |  | | |
| Contact number: |  | | |
| Email: |  | | |
| **Details of school(s) child (ren) will be attending or applying to** | | | |
| Address: | | Email: | |
| Contact Number: | | Website: | |
| Do you have any concerns regarding the reason provided for the child/children leaving the UK? | | | |

**Please submit this form to:** [**CME@Coventry.gov.uk**](mailto:CME@Coventry.gov.uk) **– 02476 978944**

**Access to Education Team (Attendance & Children Missing Education Team)**

**Coventry City Council**

**PO BOX 7097**

**Coventry**

**CV6 9SL**