



ELECTIVE HOME EDUCATION INFORMATION SHEET

You are invited to complete this information sheet in as much detail as possible. The information you feel able to provide will assist the local authority to assess the suitability of the education you are providing your child.

Alternatively, a visit from the Elective Home Education Adviser can be arranged prior to the Information Sheet being completed. Please telephone 01223 703542 if you would prefer this option.

Section A – personal details

Child's full name					
Date of birth					
Gender		Male/Female			
Ethnic origin	1. White British	5. Caribbean	9. Indian	13. White & Black Caribbean	17. Chinese
	2. White Irish	6. African	10. Pakistani	14. White & Black African	18. Any other ethnic group*
	3. Any other White background*	7. Any other Black background*	11. Bangladeshi	15. White & Asian	19. Not given
	4. Gypsy/Roma	8. Traveller of Irish Heritage	12. Any other Asian background*	16. Any other mixed background*	
Where you used a starred grouping (*) please specify					
Parents/Carers	Title	First name	Surname	Relationship to Child	
Address			Postcode:		
Telephone No:			Home:		
			Mobile:		
Email address					
Present or last school (if any) attended by your child					
Does your child have a statement of special educational needs?			Yes/No		
Does your child have learning difficulties?			Yes/No		
If yes, please specify					
Have you made a written request for your child's name be removed from the school roll? (if applicable)			Yes/No		

Reason for Home educating (optional information)

Attendance/Prosecution		Not Known	
Bullying		Not Preferred School	
Dissatisfaction with School Environment		Particular Talent	
Emotional and Behavioural Difficulties		Problems SEN Provision	
Lifestyle/Cultural/Philosophical		Racism/Homophobia	
Medical – Child		Religious Beliefs	
Medical – Parent		School Refuser/Phobic	
Near Exclusion		Other	

Section B – Outline of provision

Please give an outline of the educational provision which you will be making for your child. (It is recognised that your plans may be at a formative stage and that the programme which you intend to offer your child will develop and evolve over a period of time.)

<p>Please give details of the learning resources that will be available for your child's education, e.g. books and equipment.</p>
<p>Which library/resource centre do you plan to use?</p>
<p>Which local sports facilities do you plan to use?</p>
<p>What educational visits do you plan to undertake?</p>
<p>What opportunities will there be for your child to enjoy social contact with other children?</p>

Signature	Date
Print name	

This form should be returned within 3 weeks to:

Elective Home Education Office
 Box No: CC1103
 Room No: A110
 Castle Court
 Shire Hall
 Castle Hill
 Cambridge CB3 0AP

Tel: 01223 - 703542
 Email: ElectiveHome.Education@cambridgeshire.gov.uk