

Phased transition plan

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| <u>Name :</u> | <u>Room/class</u> |
| <u>My interests:</u> | <p><i>Things I wish my Teacher/keyperson knew about me ?</i> <i>e.g.</i> <i>I can get anxious at times of change</i> <i>I need reminding on how to ask for help</i> <i>I work better if I can have movement breaks throughout the day</i></p> |
| <u>My strengths:</u> | <p><i>e.g.</i> <i>I have a good memory</i></p> |

| | Times offered/attended | Where/when is support required What tools will be used? What will help me ? | What went well? /What did I /child enjoy? | <u>Extension of hours agreed by parents, SENCO,</u> |
|--------|---------------------------|---|--|---|
| Week1 | | | | |
| Week 2 | | | | |
| Week 3 | | | | |
| Week 4 | | | | |
| Week 5 | | | | |