# EHE consideration form (when removing from school roll)

To be completed by parent/carer If your child is on roll at a special school please refer to [Ealing’s EHE document](https://www.egfl.org.uk/sites/default/files/Services_for_children/SEND/Ealing%20EHE%20Policy%20.pdf) for required steps

**Please email the completed form to**: blundy@ealing.gov.uk

|  |  |
| --- | --- |
| Child’s name |  |
| Completed by: |  |
| Relationship to child: |  |
| Date: |  |
| Child/young person present? | Yes [ ]  No [ ]  |
| My child has an Education Health and Care Plan | Yes [ ]  No [ ]  |
| If YES – I have discussed this decision with our allocated Education Health and Care Co-ordinator | Yes [ ]  No [ ]  |
| My child has an additional need  | Yes [ ]  No [ ]  |
| If YES – I have discussed this decision with the SENDCo | Yes [ ]  No [ ]  |

|  |  |
| --- | --- |
| The school explained to me what Elective Home Education is | YES [ ]  NO [ ]  |
| The Local Authority explained to me what Elective Home Education is |  |

|  |  |
| --- | --- |
| Please provide the full name of the person/people you had the discussion with  |  |
| Role (e.g. Head of year at school, EHE support Officer - LA, Admissions officer – LA) |  |
| I have read and understood [Ealing’s EHE Guidance for Parents and Carers](https://www.ealing.gov.uk/download/downloads/id/1981/elective_home_education_guide_for_parents_and_carers.pdf)   | YES [ ]  NO |

**The parent/carer taking responsibility for educational provision is clear that:**

|  |  |
| --- | --- |
| I will take on all financial responsibility for my child’s education | YES [ ]  |
| I understand that the Local authority does not arrange/send/fund a tutor in the home or online | YES [ ]  |
| I understand that the Local Authority will make informal enquiries regarding educational provision | YES [ ]  |
| I understand that once the child is removed from roll, if home education is not suitable within 16 weeks or I cease home education within this time, Ealing’s Fair Access Protocol may apply | YES [ ]  |

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