

**Fresh Start / Fresh Start PLUS**

**End of placement form**

**Please return this form to:** [**IYFA@derby.gov.uk**](mailto:IYFA@derby.gov.uk)

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| **Name** |  | | **Gender** |  | | **Date of breakdown** | |  | |
| **School** |  | | **Year group** |  | | **DOB** |  | | |
| **Parents name** |  | | | | **Telephone** | |  | | **Code of practice** |
| **None K E** |
| **Actual attendance** |  | **Attendance print out attached** | | |  | | | | |
| **Are there any ongoing attendance concerns?** | | | | |  | | | | |
| **If yes, to ongoing concerns regarding attendance please give brief details,**  **including the name of Attendance Officer** | | | | | | | | | |
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| **New agencies involved with the family:** |  |

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| **Summarise the reasons for the end of placement** |
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| **Please provide details of support or interventions implemented, include outcomes and any funding given by In Year Fair Access** |
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| **Please indicate any achievements or rewards the pupil has experienced in your setting** |
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**Form completed by: Date:**

**Thank you for your continued support and commitment to this process.**