AR3 Parents/Carers Views for Annual Review ****

| **Child’s Name:** | **Date of Birth:** |
| --- | --- |
| **Parents/Carers’ Name/s:** | **Date of Report:** |

**Parents/Carers’ Views on their child’s progress towards the Outcomes set out in Section E of the EHC Plan**

|  |  |
| --- | --- |
| **Short Term Outcomes (or annual)** from Part 3 of SEND Support Plan |  |
| **Medium Term Outcomes** Section E of EHC Plan |  |
| **Long Term Outcomes** Section E of EHC Plan |  |

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| **Please comment on:*** How you have been involved in reviewing your child’s progress across the year
* the progress you have seen your child make
* the type of support that has been given and how well it has worked towards progress
* have there been any significant changes for the child or the family since the last review
* your hopes for the next year for your child
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Signed……………………………………………………………………. Date:………………………………………………………………….