**Part-time Timetable template**

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| --- | --- | --- |
| Childs Name | Click or tap here to enter text. | Year Group:Click or tap here to enter text. |

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| --- | --- | --- |
| **Part-time timetable category:** *Please tick the category*  School Support Package  Medical Reason  Reintegration | | |
| Social worker informed: | Yes | N/A |
| EHCP Coordinator informed: | Yes | N/A |
| Virtual School Informed | Yes | N/A |
| ISC informed | Yes | |

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| **Rationale for why this is in the best interests of the child:**  Click or tap here to enter text. |

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| **Strategies in this time to support the child**  Risk assessment  Plan on how the EHCP plan will be implemented  Click or tap here to enter text. |

Reintegration Plan and Review meetings

|  |  |  |
| --- | --- | --- |
| Week Commencing | Timetable | Review date and time with Parent |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| End date of reduced timetable: | | Click or tap here to enter text. |

Signatures of agreement that this is in the best interest of the child and is temporary.

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| --- | --- | --- |
| Parent Signature | Click or tap here to enter text. | Date Click or tap to enter a date. |
| Pupil Signature | Click or tap here to enter text. | Date Click or tap to enter a date. |
| Teacher Signature | Click or tap here to enter text. | Date Click or tap to enter a date. |
| SENCo Signature | Click or tap here to enter text. | Date Click or tap to enter a date. |