**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 assessmentPlan on how the EHCP plan will be implementedClick 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. |
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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. |