Autism Support Team

**RECEPTION** Request for support

# School details

|  |  |
| --- | --- |
| School name/address: | Date: |
| Name of person making request: |  |
| Email: | Telephone No: |

# CLASS details

|  |  |  |
| --- | --- | --- |
| Name of Class teacher :  Email: | Class Name: | Year group: **RECEPTION** |
| Name of Class Teaching Assistant(s): | School SENCo:  Email: | |
| What are the current challenges in your classroom? | | |
| What classroom strategies are you using? | | |
| What support are you requesting from the AST? | | |
| What changes are you hoping to see in your classroom? | | |

training accessed

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Class teacher | TA | TA | TA |
| AET Making Sense of Autism |  |  |  |  |
| AET Good Autism Practice |  |  |  |  |
| AET Autism and Anxiety |  |  |  |  |
| Understanding Behaviour & Completing ABC charts |  |  |  |  |
| Using Visuals to support  students with ASD |  |  |  |  |
| Adapting the Curriculum |  |  |  |  |
| Social Narratives |  |  |  |  |
| TEACCH |  |  |  |  |
| TA drop – in |  |  |  |  |
| Other (please indicate) |  |  |  |  |
| AST training calendar 23-24 | [here](https://docs.google.com/document/d/1xMpBANAX31sBCzPBYT7M2Q6RTDJnPJtw/edit?usp=sharing&ouid=103959771864454859744&rtpof=true&sd=true) | | | |

# OTHER Available support

|  |  |
| --- | --- |
| Monthly TA drop in |  |
| AST newsletters |  |
| Parent coffee morning |  |
| Next Steps for parents with children under 5 |  |
| Cygnet for parents with children over 5 |  |

**Email the completed Request for Support (RFS) to:**

[**AutismSupportTeam@southwark.gov.uk**](mailto:AutismSupportTeam@southwark.gov.uk)