

_____ (name of child/young person)

may need extra support/ understanding at this time.

He or she may

Need:

Feel:

These are the trusted adults in school who need to know this:

Any other comments:

Signed: _____
(Staff member)

Date: _____

Signed: _____
(Child/young person)

Review date: _____

Signed: _____
(Parent/carer)