# Appendix 1 – Early Years Transition Fund Consent form

|  |
| --- |
| **Child’s Information** |
| Name |  | DoB: | Gender: |
| School |  |
| Previous setting |  |
| School SENCo |  |
| Contact email |  |
| Telephone |  |
| **Checklist** |
| Early Help Assessment/Reviews |  |
| Date of last review or EHA |  |
| Is this signed by Lead professional? |  |
| Is this signed by the child’s parent/carer? |  |
| Is a Transition Plan included? |  |
| **Security** |
| Applications should be sent by secure email to: startwellsend@bolton.gov.uk  |
| **School declaration** |
| I understand that the Early Years SEN Transition Fund allocated is designed to supplement the School’s Notional Budget in the first term to support effective transition.  |
|  |  |
| **Signed (on behalf of the school)** | **Date** |
|  |  |
| **Signed by parent/carer** | **Date** |