

Admission Policy

Referral Process

There is a simple 3 stage process to refer pupils to the CornerPost Education Centre:

Stage 1

1. CornerPost attends primary D.I. P's where referrals can be made.
2. The school requests a referral form and returns it to CornerPost Education Centre.

Stage 2

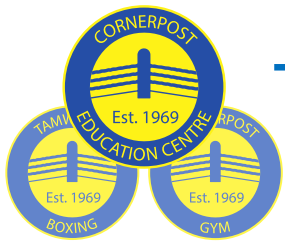
1. A visit is required with the pupil, parents, and key staff members.
2. A plan action is discussed and agreed between the CornerPost and the school (and parents).

Stage 3

1. The pupil starts at the CornerPost.

It is important to pay cognisance to the fact that there is no minimum or maximum time for a pupil to stay at the CornerPost. Our objective is to support the schools and education system and for the pupil to return to mainstream education with fundamental changes in emotional and educational skills. Every school, pupil and exclusion situation are unique. Our plans and frameworks are devised in partnership with the schools involved and crucially agreed by the parents. Once a plan is agreed it is reviewed on an ongoing basis by the school and the CornerPost during which time we are flexible and experienced enough to be able to change provision at any time for the benefit of the pupil.

Review Date: Nov 2021



The CornerPost Education Centre

Referral Form

Where Everyone Matters



General Information

Students Name					Current School				
Year Group		Key Stage		D.O.B		Parents / Carer Consent given			
Parents / Carers Signature						Head Teachers Signature			
Date of Referral				Contact Name of Referrer					
Contacts Number					Contacts Email				
Planned Start Date					UPN Number:				
Attendance	Last Year	%	Current	%	Number of Fixed Term Exclusions				
Registered on My Concern					Has a Boxhall Profile been carried out				

Emergency Contact Details

	Name	Relationship	Number
1 st			
2 nd			
3 rd			

Reason for Referral

Welfare

Looked After Child				Name of Social Worker			
Child In Need		Child Protection		Free School Meals			
Education Health Care Plan		Started		In Process		Completed	
Is a Educational Psychologist known to the child					Name		

Please inform if any other outside agencies are involved;

Medical Concerns:

Behaviour	
Social Interaction	
Spoken Language	
Reading	
Writing	
Spelling	
Maths	
Times Tables	

Any Other Comments