

Details of current practice:

(Include specific details i.e. frequency, duration, subjects/contents used and when support is applied during assessments.)

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SECTION B – DURATION AND CONSISTENCY

How long has this support been in place?

Less than 6 months 6-12 months Over 12 months

Is this support used **consistently** across learning and assessment?

Yes No

If no, please explain:

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SECTION C – PROFESSIONAL DECLARATION

I confirm that this information is accurate and reflects the pupil's **established Usual Way of Working** in normal school practice.

Name:

Signature:

Date:

***Please affix the school stamp here.
If a school stamp is not available, please attach
confirmation on school headed paper.***