

Part-time Timetable Agreement

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| Date of Meeting , Venue & House | | Time: | |
| Name of Pupil | | DOB: | |
| Address: | | | |
| Reason for Part Time Timetable: | | | |
| Hours Agreed and Duration | | Review Date: | |
| YOS involved: | | Yes | No |
| Risk of Substance Misuse: YES NO | | Yes | No |
| Any CP/CIN Concerns: | | Yes | No |
| Consideration of CAF? (Please see M Howard or J Inman if Yes) | | Yes | No |

The purpose of the agreement is to manage behaviour and prevent further disaffection, with a view to steadily resume full time attendance.

Signed:
(School)

Date:

I parent/guardian/carer will take Educational and Parental responsibility for

..... during the hours they are not in school:

Signed:
(parent/guardian)

Date:

I (pupil) agree to the part time timetable arrangements.

Signed:
(pupil)

Date: